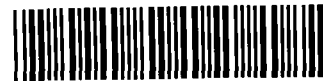


STATE OF ILLINOIS



0541423

TO BE COMPLETED BY
WASTE GENERATORENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

460636

Authorization Number 9 9 7 2 2 7
8 13

0 3 1 1 5 9 0 0 0 4

I L D 0 0 5 2 2 9 4 4 8

Generator Number 14 24

BEE CHEMICAL CO.

2700 E. 170th St. 312 474-7000

(Company Name)

Address

Phone Number

Lansing,

IL

60438

City

State

Zip

I L D 0 0 5 2 2 9 4 4 8

EPA Number

WASTE HAULER(S)

Mr. Frank, Inc.

South Holland, IL

Hauler Name

Hauler Address

S.W.H. Registration Number 0079001

25 31

312 596-3377

Phone Number

I L D 0 6 9 25 0 6160

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number

32 38

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical

420 S. Colfax Avenue

(Facility Name)

Address

9 1 8 0 8 9 0 2

39 Site Number 46

Griffith

IN

46319

219-766-3400

IND 0 1 6 3 6 0 2 6 5

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39 Site Number 46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Flammable Paint Solvents

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Flammable

UN 1993

UN or NA Number

EPA HW Number

WEIGHT FOR
D.O.T. USE

LBS

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS _____)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

J. Berillo
(Authorized Signature)

DATE: 4-21-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)
(Authorized Signature)

DATE: 4/21/82

(2) _____
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO ☒

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 4/21/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

TO 109K 4.21.82 T-63 GRM

002193

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541426

Authorization Number 9 9 7 2 2 7
8 13

BEE CHEMICAL CO. 2700 E. 170th St. 312/474-7000 0 3 1 1 5 9 0 0 0 4
(Company Name) Address Phone Number 14 Generator Number 24
Lansing, IL 60438 I L D 0 0 5 2 2 9 4 4 8
City State Zip EPA Number

WASTE HAULER(S)

MR. FRANK, INC. South Holland, IL
Hauler Name Hauler Address
312-596-1377
Phone Number
S.W.H. Registration Number 0079018
25 31
I L D 0 6 9 5 0 6 1 6 0
EPA Number

Hauler Name Hauler Address
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL 420 S. Colfax Avenue 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 46
Griffith IN 46319 768 312-596-3400 IND 0 1 6 3 6 0 2 6 5
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Flammable Paint Solvents

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Flammable

1

UN 1993
UN or NA Number

EPA HW Number

WEIGHT FOR
D.O.T. USE

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 003500

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 5-6-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(Authorized Signature)

DATE: 05/06/82
154 59

(2) (Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature)

DATE: 5/6/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217/782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800/742-8802 or 202/426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

TO 109KT-63 GRM 5-6-82

002194

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0416914

Authorization Number 997231

Bee Chemical Co. 500 State St. 312 758 0500 0310450010
(Company Name) Address Phone Number Generator Number
City State Zip EPA Number
FLD089828016

Mr. J. M. ... 201 W. 15th St.
Hauler Name Hauler Address
South Holland IL 312 596 3377
City State Zip Phone Number
EPA Number
S.W.H. Registration Number 0079009

Hauler Name Hauler Address
City State Zip Phone Number EPA Number
S.W.H. Registration Number

AMERICAN CHEMICAL P.O. BOX 190 91808902
(Facility Name) Address Site Number
Dyffith Ind. 463193127683400 INDO16360365
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY WASTE GENERATOR
WASTE NAME: Dirty Oil & Solvent WASTE PHASE: Liquid
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
SHIPPING DESCRIPTION: Tank Truck Flammable HAZARD CLASS: UN1993
EPA HW Number: E003
WEIGHT FOR D.O.T. USE LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 805000
METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION
Authorized Signature: [Signature] DATE: 5/4/82

WASTE HAULER
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:
(1) Tom Berry (Authorized Signature) DATE: 05/04/82
(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*
HAZARDOUS WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.
(Authorized Signature) DATE: 05/04/82

COMMENTS OR SPECIAL INSTRUCTIONS:
IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR
REV. # 3

SITE COPY - PART 3 To 126K T-63 GRM 5.4.82

002195

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541425

Authorization Number 9 9 7 2 2 7
8 13

BEE CHEMICAL CO. 2700 E. 170th St. 312-474-7000

(Company Name)

Address

Phone Number

Lansing,

IL

60438

City

State

Zip

3 1 1 5 9 0 0 0 4

14

Generator Number

24

I L D 0 0 5 2 2 9 4 4 8

EPA Number

WASTE HAULER(S)

MR. FRANK, INC. South Holland, IL

Hauler Name

Hauler Address

S.W.H. Registration Number 0079009

312-596-3377

Phone Number

I L D 0 6 9 5 0 6 1 6 0

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL 420 S. Colfax Avenue

(Facility Name)

Address

* 9 1 8 0 8 9 0 2

39

Site Number

46

Griffith

IN

46319

219-796-3400

IND 0 1 6 3 6 0 2 6 5

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39

Site Number

46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Flammable Paint Solvents

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW

SHIPPING DESCRIPTION:

HAZARD CLASS:

Flammable

1

U N 1 9 9 3

UN or NA Number

E005

EPA HW Number

WEIGHT FOR
D.O.T. USE

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004500

47

52

GALLONS (Circle One)
CU. YDS.

53

METHOD OF SHIPMENT (Circle One)

(DRUMS _____)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Russell R. Bush
(Authorized Signature)

DATE: 4-29-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) Tom Berry
(Authorized Signature)

DATE: 4/29/82

(2) _____
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 4-29-82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 782-3637

24 HOUR EMERGENCY AND COMPLIANCE ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-3802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 109KT-63 6PM 4-29-82

002196

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541427

Authorization Number 9 9 7 2 2 7
8 13

BEE CHEMICAL CO. 2700 E. 170th St. 312-474-7000 0 3 1 1 5 9 0 0 0 4 6
(Company Name) Address Phone Number 14 Generator Number 24
LANSING, IL 60438 I L D 0 0 5 2 2 9 4 4 8
City State Zip EPA Number

WASTE HAULER(S)

MR. FRANK, INC. South Holland, IL
Hauler Name Hauler Address
201 W. 155th St. 312-596-3377
Hauler Name Hauler Address
Phone Number EPA Number
S.W.H. Registration Number 0 0 7 9 0 0 9
25 31
I L D 0 6 9 5 0 6 1 6 0
EPA Number
S.W.H. Registration Number 32 38

AMERICAN CHEMICAL 420 S. Colfax Avenue 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 46
Griffith IN 46319 219-796-3400 IND 0 1 6 3 6 0 2 6 5
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Flammable Paint Solvents WASTE PHASE: Liquid
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)
SHIPPING DESCRIPTION: Flammable HAZARD CLASS: 1 UN 1993
EPA HW Number 8005

WEIGHT FOR LBS WEIGHT FOR I.E.P.A. USE MUST BE QUANTITY OF WASTE DELIVERED: 0 0 4 8 0 0
D.O.T. USE TONS (circle one) CONVERTED TO CU. YDS. OR GAL. 47 52 53
METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify) 51 41 2

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) DATE: 5-14-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Donald H. Burt (Authorized Signature) DATE: 05/14/82
(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE: HAZARDOUS WASTE SUBJECT TO FEE YES NO X
(Authorized Signature) DATE: 5/14/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 782-3637 *24 HOUR EMERGENCY AND GPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR
REV. # 3

SITE COPY - PART 3

To 109KT-63 GRM 5/14/82

002197

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541428

Authorization Number 9 9 7 2 2 7
8 13

BEE CHEMICAL CO.

2700 E. 170th St. 219-374-7000

0 3 1 1 5 9 0 0 4

(Company Name)

Address

Phone Number

14

Generator Number

24

LANSING

IL

60438

I L D 0 0 5 2 2 9 4 4 8

City

State

Zip

EPA Number

WASTE HAULER(S)

MR. FRANK, INC.

South Holland, IL

S.W.H. Registration Number 0079009

Hauler Name

Hauler Address

312-596-3377

I L D 0 6 9 5 0 6 1 6 0

Phone Number

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL

420 S. Colfax Avenue

9 1 8 0 8 9 0 2

(Facility Name)

Address

39

Site Number

46

GRIFFITH

IN

46319

219-769-3400

IND 0 1 6 3 6 0 2 6 5

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39

Site Number

46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Flammable Paint Solvents

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Flammable

* 1

UN 1993

UN or NA Number

F005

EPA HW Number

WEIGHT FOR
D.O.T. USE

LBS

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004700

47

52

1 GALLONS (Circle One)
2 CU. YDS.

53

METHOD OF SHIPMENT (Circle One)

(DRUMS _____)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

J. Benule

(Authorized Signature)

DATE: _____

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) Tom Perry

(Authorized Signature)

DATE: 05/21/82

(2) _____

(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

J. Benule

(Authorized Signature)

DATE: 5-24-82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS 217/782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

REV # 3

SITE COPY - PART 3

TO 109K T-63 62M 5.21.82 002198

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0416915

Authorization Number 997231

Bee Chemicals 500 State St 312 758 0500 0310450010
(Company Name) Address Phone Number Generator Number
Chicago Heights IL 60411 ILD089828016
City State Zip EPA Number

WASTE HAULER(S)

Mr. Frankel Inc 201 W. 155th St.
Hauler Name Hauler Address
South Holland IL 60473 312 596 3377
City State Zip Phone Number
S.W.H. Registration Number 0079021
EPA Number ILD069506160

S.W.H. Registration Number 32

Amiecar Chemical P.O. Box 190 91808902
(Facility Name) Address Site Number
Griffith IN 46319 312 768 3400 IND016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Dirty Oil & Solvent WASTE PHASE: Liquid
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
SHIPPING DESCRIPTION: Tank Truck HAZARD CLASS: Flammable UN 1993
WEIGHT FOR D.O.T. USE LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 004500
METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify) 53
THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Charles Howe DATE 5/20/82
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Tom Berry DATE 5/20/82
(Authorized Signature) 54 59
(2) DATE 1/1/82
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

DATE 05/20/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

T01247E T-53 GPM 5-20-82

002199

WASTE BY OR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541429

Authorization Number 9 9 7 2 2 7
8 13

BEE CHEMICAL CO. 2700 E. 170th St. 312-474-7000 0 3 1 1 5 9 0 0 0 4
(Company Name) Address Phone Number
Lansing IL 60438 I L D 0 0 5 2 2 9 4 4 8
City State Zip Generator Number
EPA Number

WASTE HAULER(S)

MR. FRANK, INC SOUTH HOLLAND, IL 60473 312-596-3377 0079021
Hauler Name Hauler Address Phone Number S.W.H. Registration Number
201W. 155th I L D 0 6 9 5 0 6 1 6 0
Hauler Name Hauler Address Phone Number S.W.H. Registration Number
EPA Number

AMERICAN CHEMICAL 420 S. Colfax Avenue 9 1 8 0 8 9 0 2
(Facility Name) Address
Griffith IN 46319 219-769-3400 IND 0 1 6 3 6 0 2 6 5
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Flammable Paint Solvents

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Flammable

1

UN 1993

UN or NA Number

FOOS
EPA HW Number

WEIGHT FOR
D.O.T. USE

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004700

004700 2 GALLONS (Circle One)
52 CU. YDS. 53

METHOD OF SHIPMENT (Circle One)

(DRUMS
Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

J. Bouille
(Authorized Signature)

DATE: 5/27/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) Gary P. [Signature]
(Authorized Signature)
(2) [Signature]
(Authorized Signature)

DATE: 5/27/82
54 59
DATE: 5/27/82
60 65

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[Signature]
(Authorized Signature)

DATE: 5/27/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

TO 109F T-63 6KUM 5-27-82

002200

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541430

Authorization Number 9 9 7 2 27
8 13

BEE CHEMICAL CO. 2700 E. 170th St. 312-474-7000 0 3 1 1 5 9 0 0 0 4
(Company Name) Address Phone Number 14 Generator Number 24
LANSING IL 60438 IL D 0 0 5 2 2 9 4 4 8
City State Zip EPA Number

201 W. 155th
MR. FRANK, INC. SOUTH HOLLAND, IL
Hauler Name Hauler Address
312-5960337
Phone Number
I L D 0 6 9 5 0 6 1 6 0
S.W.H. Registration Number 25 31
EPA Number

Hauler Name Hauler Address
Phone Number EPA Number

AMERICAN CHEMICAL 420 S. Colfax Avenue 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 46
GRIFFITH IN 46319 219-769-3400 IND 0 1 6 3 6 0 2 6 5
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Flammable Paint Solvents

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Flammable

1

UN 1993

UN or NA Number

FOOS
EPA HW Number

WEIGHT FOR D.O.T. USE 36,000 LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004800 1 GALLONS (Circle One) 2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

[Signature]
(Authorized Signature)

DATE: 6-3-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [Signature]
(Authorized Signature)

DATE: 06/03/82

(2) _____
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 6-3-82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

TO 109K T-63 6RM 6.3.82 002201

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541432

9 9 7 2 2 7

Authorization Number 8 13

Bee Chemical Co. 2700 E. 170th St. 312-474-7000

0 3 1 1 5 9 0 0 0 4

(Company Name)

Address

Phone Number

14

Generator Number

24

Lansing,

IL

60438

I L D 0 0 5 2 2 9 4 4 8

City

State

Zip

EPA Number

WASTE HAULER(S)

Mr. Frank, Inc.

201 W. 155th St.
South Holland, IL

S.W.H. Registration Number 0079009

Hauler Name

Hauler Address

312-596-3377

Phone Number

I L D 0 6 9 5 0 6 1 6 0

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

Phone Number

EPA Number

AMERICAN CHEMICAL

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
420 S. Volfax avenue

9 1 8 0 8 9 0 2

(Facility Name)

Address

39

Site Number

46

Griffith

IN

46319

219-769-3400

IND 0 1 6 3 6 0 2 6 5

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39

Site Number

46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Flammable Paint Solvents

WASTE PHASE: Liquid

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

Flammable

1

U N 1 9 9 3

UN or NA Number

FR05

EPA HW Number

WEIGHT FOR
D.O.T. USE

LBS

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED:

005000 1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

J. B. B. B.
(Authorized Signature)

DATE: 6-16-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *Mike P. P.*
(Authorized Signature)

DATE: 6/16/82

(2) _____
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

(Authorized Signature)

DATE: 6/16/82

COMMENTS OR SPECIAL INSTRUCTIONS:

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 109K 7-63 6KMA 6-16-82

002202

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541431

Authorization Number 997227
8 13

Bee Chemical Co. 2700 E. 170th St. 312-474-7000 0311590004
(Company Name) Address Phone Number 14 Generator Number 24
Lansing, IL 60438 IL D 0 0 5 2 2 9 4 4 8
City State Zip EPA Number

Mr. Frank, Inc. 201 W. 155th St. WASTE HAULER(S)
South Holland, IL
Hauler Name Hauler Address
312-59643377
Phone Number
S.W.H. Registration Number 25 31
I L D 0 6 9 5 0 6 1640
EPA Number

Hauler Name Hauler Address
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
American Chemical 420 S. Colfax Avenue 91808902
(Facility Name) Address 39 Site Number 46
Griffith, IN 46319 219-769-3400 INDO 16360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Flammable Paint Solvents

WASTE PHASE: Liquid

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS.

Flammable

1

U N 1 9 9 3

UN or NA Number

F005
EPA HW Number

WEIGHT FOR
D.O.T. USE

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004500
47 52

1 GALLONS (Circle One)
2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One)

(DRUMS _____)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

G. Benille
(Authorized Signature)

DATE: 6/10/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *Gary Pauer*
(Authorized Signature)

DATE: 6/10/82
54 59

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO ☒

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature)

DATE: 6/10/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR
REV. # 3

SITE COPY - PART 3

To 109KT-636PM 6.10.82

002203

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0416920

Authorization Number 997231

Bee Chemical Co 500 State St 3127580500 0310450010
(Company Name) Address Phone Number Generator Number
Chicago Heights IL 60411 ILD089828016
City State Zip EPA Number

Mr. J. R. Rupp 201 W. 155th St. 3125963377 0079021
Hauler Name Hauler Address Phone Number S.W.H. Registration Number
South Holland, IL 60473 ILD069506160
Hauler Address Phone Number EPA Number

Hauler Name Hauler Address Phone Number S.W.H. Registration Number EPA Number

American Chemical P.O. Box 190 918089025
(Facility Name) Address Site Number
Griffith Ind 46319 IND016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR
WASTE NAME Dirty Ink & Solvent WASTE PHASE Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
SHIPPING DESCRIPTION: Tank Truck HAZARD CLASS: Flammable UN1993 F003
UN or NA Number EPA HW Number

WEIGHT FOR D.O.T. USE LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 004700 1 GALLONS (Circle one) CU. YDS.
47 52 53

METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION X Harry Stark DATE: 6/11/82
(Authorized Signature)

WASTE HAULER
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:
(1) [Signature] DATE: 06/11/82
(Authorized Signature) 54 59
(2) [Signature] DATE: 1/1/1
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY: [Signature] HAZARDOUS WASTE SUBJECT TO FEE YES NO X
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:
(Authorized Signature) DATE: 6/11/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR
REV. # 3

SITE COPY - PART 3 To 125 RT-63 6PM 6/11/82 002204

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541433

Authorization Number 9 9 7 2 2 7
8 13

BEE CHEMICAL CO. 2700 E. 170th St. 312-474-7000 0 3 1 1 5 9 0 0 0 4
(Company Name) Address Phone Number 14 Generator Number 24
Lansing IL 60438 I L D 0 0 5 2 2 9 4 4 8
City State Zip EPA Number

WASTE HAULER(S)

Mr. Frank, Inc. 201 W. 155th St.
Hauler Name Hauler Address South Holland, IL
312-596-3377
Phone Number
S.W.H. Registration Number 0079029
25 31
I L D 0 6 9 5 0 6 1 6 0
EPA Number

S.W.H. Registration Number 32 38

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
American Chemical 420 S. Colfax Avenue 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 46
Griffith IN 46319 219-769-3400 IND 0 1 6 3 6 0 2 6 5
City State Zip Phone Number EPA Number

Alternate (Facility Name)

Address

39

Site Number 46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Flammable Paint Solvents

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

xxRxx Flammable

1

UN 1993
UN or NA Number

F005
EPA HW Number

WEIGHT FOR
D.O.T. USE

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000
47 52

1 GALLONS (Circle One)
2 CU. YDS. 1
53

METHOD OF SHIPMENT (Circle One)

(DRUMS
Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 6-23-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 06/23/82
54 59

(2) (Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature)

DATE: 6/23/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 109K T-63 GKM 6-23-82

002205

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541434

Authorization Number 9 9 7 2 2 7
8 13

BEE CHEMICAL COMPANY 2700 E. 170th St. 312-474-7000 0 3 1 1 5 9 0 0 0 4 G
(Company Name) Address Phone Number 14 Generator Number 24
Lansing IL 60438 I L D 0 0 5 2 2 9 4 4 8
City State Zip EPA Number

WASTE HAULER(S)

Mr. Frank, Inc. 201 W. 155th Street
Hauler Name Hauler Address
312-596-3377
Phone Number
S.W.H. Registration Number 25 31
ILD 0 6 9 5 0 6 1 6 0
EPA Number

Hauler Name Hauler Address
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemcial Co. 420 S. Colfax Avenue 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 46
Griffith IN 46319 219-769-3400 IND 0 1 6 3 6 0 2 5 5
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Flammable Paint Solvents

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Flammable

Exk 1

UN 1993
UN or NA Number

FOOS
EPA HW Number

WEIGHT FOR D.O.T. USE LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 604000 1 GALLONS (Circle One) 2 CU. YDS. 1 53

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

J. Bevilacqua
(Authorized Signature)

DATE: 6/30/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *Margaret P. ...*
(Authorized Signature)

DATE: 6/30/82
54 59

(2) _____
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO _____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

J. Bevilacqua
(Authorized Signature)

DATE: 6/30/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS, 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 109KT-83 GRM 6-30-82

002206

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541435

Authorization Number

BEE CHEMICAL COMPANY 2700 E. 170th St. 312-474-7000 0 3 1 1 5 9 0 0 0 4
(Company Name) Address Phone Number Generator Number
Lansing IL 60438 I L D 0 0 5 2 2 9 4 4 8
City State Zip EPA Number

WASTE HAULER(S)

Mr. Frnk, Inc. 201 W. 155th St. S.W.H. Registration Number 0079009
Hauler Name Hauler Address Phone Number 312-596-3377
S.W.H. Registration Number 069506160
EPA Number

Hauler Name Hauler Address Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
American Chemical 420 S. Coifax Avenue 9 1 8 0 8 9 0 2
(Facility Name) Address Site Number
Griffith IN 46319 219-769-3400 IND 0 1 6 3 6 0 2 6 5
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Flammable Paint Solvents WASTE PHASE: Liquid
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

Flammable

1

UN 1993
UN or NA Number

FEOS
EPA HW Number

WEIGHT FOR LBS WEIGHT FOR I.E.P.A. USE MUST BE QUANTITY OF WASTE DELIVERED: 002800 1 GALLONS (Circle One)
D.O.T. USE TONS (circle one) CONVERTED TO CU. YDS. OR GAL. 47 52 2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

AG Benille
(Authorized Signature)

DATE: 7-7-82.

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) J. Kolbert
(Authorized Signature)

DATE: 07/07/82.
54 59

(2)
(Authorized Signature)

DATE:
54 59

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 7.7.82
65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 109K T-63 6PM 7.7.82

002207

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541436

Authorization Number

BEE CHEMICAL COMPANY 2700 E. 170th St. 312-474-7000

(Company Name)

Address

Phone Number

Lansing,

IL

60438

City

State

Zip

0311590004

Generator Number

ILD005229448

EPA Number

WASTE HAULER(S)

Mr. Frank, Inc.

201 W. 155th St.
South Holland, IL

Hauler Name

Hauler Address

S.W.H. Registration Number

0079007

312-596-3377

Phone Number

ILD069506160

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical

420 S. Colfax Avenue

(Facility Name)

Address

91808902

Site Number

Griffith

IN

46319

219-762-3400

IND016360265

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

Site Number

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Flammable Paint Solvents

WASTE PHASE: Liquid

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

Flammable

1

UN1993

UN or NA Number

F805

EPA HW Number

WEIGHT FOR
D.O.T. USE

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED

005000

GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS
Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

J. Beville
(Authorized Signature)

DATE: 7-14-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *Gary Brown*
(Authorized Signature)

DATE: 07/14/82

(2) _____
(Authorized Signature)

DATE: 7/14/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO ☒

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

J. Beville
(Authorized Signature)

DATE: 07/14/82

COMMENTS OR SPECIAL INSTRUCTIONS:

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217/782-3637

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 109K T63 6RM 7/14/82

002208

**TO BE COMPLETED BY
WASTE GENERATOR**

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0416918

Authorization Number

Bee Chemical Co. 500 State St 3127580500 0310450010
(Company Name) Address Phone Number Generator Number

IL0089828016
EPA Number

City State Zip

WASTE HAULER(S)

Mr. Frank, Inc 201 W. 155th St. 3125963377 0079009
Hauler Name Hauler Address Phone Number S.W.H. Registration Number

South Holland, IL 60473 IL0069506160
Hauler Address Zip Phone Number EPA Number

American Chemical P.O. Box 190 91808902
(Facility Name) Address Site Number

Griffith Ind. 46319317083400 IND016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number

City State Zip Phone Number EPA Number

**TO BE COMPLETED BY
WASTE GENERATOR**
WASTE NAME: Dirty Ink & Solvent WASTE PHASE: Liquid
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION: Tank Truck HAZARD CLASS: Flammable UN1993 F003
UN or NA Number EPA HW Number

WEIGHT FOR D.O.T. USE _____ LBS _____ TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 005000 1 GALLONS (Circle One) 1 CU. YDS.
47 52 53

METHOD OF SHIPMENT (Circle One) (DRUMS _____) TANK TRUCK OPEN TRUCK OTHER (Specify) _____
Number

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Mary Stant DATE: 7/15/82
(Authorized Signatory)

WASTE HAULER
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:
(1) Donald H. Bell DATE: 07/15/82
(Authorized Signature) 54 59
(2) _____ DATE: _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY
HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:
J. D. [Signature] DATE: 7/15/82
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR
REV. # 3

SITE COPY - PART 3

TO 126KT-63 GRM 7.15.82

002209

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541439

Authorization Number 8 13

BEE CHEMICAL CO. 2700 E. 170th St. 312-474-7000 0 3 1 1 5 9 0 0 0 4
(Company Name) Address Phone Number Generator Number
LANSING IL 60438 I L D 0 0 5 2 2 9 4 4 8
City State Zip EPA Number

MR. FRANK, INC. 201 W. 155th St. WASTE HAULER(S)
SOUTH HOLLAND, IL
Hauler Name Hauler Address
312-596-3377
Phone Number
S.W.H. Registration Number 0079619
ILD 0 6 9 5 0 6 1 6 0
EPA Number

Hauler Name Hauler Address
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
AMERICAN CHEMICAL 420 S. Colfax Avenue 9 1 8 0 8 9 0 2
(Facility Name) Address Site Number
Griffith IN 46319 219-769-3400 IND 0 1 6 3 6 0 2 6 5
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR
WASTE NAME: Flammable Paint Solvents WASTE PHASE: Liquid
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
SHIPPING DESCRIPTION: HAZARD CLASS: UN 1993
Flammable 1 UN or NA Number
EPA HW Number F005

WEIGHT FOR LBS WEIGHT FOR I.E.P.A. USE MUST BE QUANTITY OF WASTE DELIVERED: 005010 1 GALLONS (Circle One)
D.O.T. USE TONS (circle one) CONVERTED TO CU. YDS. OR GAL. 47 52 2 CU. YDS. 53
METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION
J. Berullo
(Authorized Signature) DATE: 7-29-82

WASTE HAULER
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:
(1) (Authorized Signature) DATE: 07/29/82
(2) (Authorized Signature) DATE: 1/1/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY HAZARDOUS WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:
(Authorized Signature) DATE: 07/29/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR
REV. # 3

SITE COPY - PART 3

70 12/27-63 56111 7-29-82

002210

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541440

Authorization Number 8 13

BEE CHEMICAL CO., 2700 E. 170th St. 312-474-7000 0 3 1 1 5 9 0 0 0 4 G
(Company Name) Address Phone Number 14 Generator Number 24
Lansing IL 60438 I L D 0 0 5 2 2 9 4 4 8
City State Zip EPA Number

WASTE HAULER(S)

Mr. Frank, Inc. 420 S. Colfax Avenue 312-596-3377 IND 0 6 9 5 0 6 1 6 0
Hauler Name Hauler Address Phone Number EPA Number
S.W.H. Registration Number 25 31

Hauler Name Hauler Address Phone Number EPA Number
S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical 420 S. Colfax Avenue 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 46
Griffith IN 46319 769-3400 IND 0 1 6 3 6 0 2 5 5
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Flammable Paint Solvents WASTE PHASE: Liquid
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

Flammable

1

UN 1993

UN or NA Number

8005
EPA HW Number

WEIGHT FOR D.O.T. USE LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 0050000 1 GALLONS (Circle One) 2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

J. Bouville
(Authorized Signature)

DATE: 8-05-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 08/05/82 54 59

(2) (Authorized Signature)

DATE: 1/1/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 8/5/82 60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

TO DIF 7-63 6PM 8-5-82

002211

STATE OF ILLINOIS

TO BE COMPLETED BY
WASTE GENERATORENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0416917

Authorization Number 8 13

Bee Chemical Co 500 State St 3127580500 0310450010
(Company Name) Address Phone Number Generator Number
IL0089828016
City State Zip EPA Number

Mr. Franko 201 W. 155th St
Hauler Name Hauler Address
South Holland IL 3125963377
60473 Phone Number
S.W.H. Registration Number 0079026
EPA Number IL0069506160

American Chemical P.O. Box 190
(Facility Name) Address
Griffith Ind 4631931276 3400 IND016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address

City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR
WASTE NAME: Dirty Oil & Solvent WASTE PHASE: Liquid
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)
SHIPPING DESCRIPTION: Tank Truck Flammable UN1993 F003
HAZARD CLASS: UN or NA Number EPA HW Number

WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL QUANTITY OF WASTE DELIVERED: 5000 1 GALLONS (Circle One)
52 2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Harry Stant DATE: 8/13/82
(Authorized Signature)

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) CBowick DATE: 8/13/82
(Authorized Signature) 54 59
(2) _____ DATE: _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:
W. H. Schmidt DATE: 8/13/82
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR
REV. # 3

SITE COPY - PART 3

TO 126 E T-63 6PM 8.13.82
002212

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541442
7

Authorization Number 8 13

BEE CHEMICAL COMPANY 2700 E. 170th St. 312-474-7000 03 1 1 5 9 0 0 0 4
(Company Name) Address Phone Number 14 Generator Number 24
Lansing IL 60438 I L D 0 0 5 2 2 9 4 4 8
City State Zip EPA Number

WASTE HAULER(S)
MR. FRANK, INC. 201 W. 155th Street
Hauler Name Hauler Address
312-596-3377
Phone Number
S.W.H. Registration Number 0079018
IND 0 6 9 5 0 6 1 6 0
EPA Number

Hauler Name Hauler Address
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
AMERICAN CHEMICAL 420 S. Colfax Avenue
(Facility Name) Address
Griffith IN 46319 219-769-3400 IND 0 1 6 3 6 0 2 6 5
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Flammable Paint Solvents

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Flammable

1

UN 1993
UN or NA Number

F805
EPA HW Number

WEIGHT FOR D.O.T. USE 38,000 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004500
GALLONS (Circle One)
CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 8-18-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Robert Perkins
(Authorized Signature)

DATE: 8/18/82

(2) _____
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 8/18/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

T01212 T-63 6KM 8-18-82

002213

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541441

Authorization Number 8 13

BEE CHEMICAL CO. 2700 E. 170th St. 312-474-7000 0 3 1 1 5 9 0 0 0 4
(Company Name) Address Phone Number
27290 Lansing IL 60438
City State Zip
Generator Number 14 24
EPA Number 1 1 0 0 5 2 2 9 4 4 8

Mr. Frank, Inc. 4201 W. 155th Street
Hauler Name Hauler Address
312-596-3377
Phone Number
S.W.H. Registration Number 25 31
IND 0 6 9 5 0 6 1 6 0 6
EPA Number

Hauler Name Hauler Address
Phone Number EPA Number

AMERICAN CHEMICAL 420 S. Colfax Avenue
(Facility Name) Address
Griffith IN 46319 219-769-3400 IND 0 1 6 3 6 0 2 6 5
City State Zip Phone Number
EPA Number
Alternate (Facility Name) Address
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR
WASTE NAME: Flammable Paint Solvents WASTE PHASE: Liquid
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
SHIPPING DESCRIPTION: HAZARD CLASS: UN 1993
Flammable 1
UN or NA Number EPA HW Number

WEIGHT FOR LBS WEIGHT FOR I.E.P.A. USE MUST BE QUANTITY OF WASTE DELIVERED: 004500 1 GALLONS (circle One)
D.O.T. USE TONS (circle one) CONVERTED TO CU. YDS. OR GAL. 47 52 2 CU. YDS.
METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION
(Authorized Signature) DATE: 8-12-82

WASTE HAULER
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:
(1) (Authorized Signature) DATE: 8/12/82
(2) (Authorized Signature) DATE: 8/12/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:
(Authorized Signature) DATE: 8/12/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR FOR
REV. # 3

SITE COPY - PART 3

To 121 RT-63 6PM 8.12.82

002214

STATE OF ILLINOIS

TO BE COMPLETED BY
WASTE GENERATORENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541443

Authorization Number 8 13

BEE CHEMICAL COMPANY 2700 E. 170th St. 312-474-7000 0 3 1 1 5 9 0 0 0 4 G
(Company Name) Address Phone Number 14 Generator Number 24
Lansing, IL 60438 I L D 0 0 5 2 2 9 4 4 8
City State Zip EPA Number

MR. FRANKS, INC. 201 W. 155th St. WASTE HAULER(S)
~~AMERICAN CHEMICAL~~ South Holland, IL
Hauler Name Hauler Address
312-596-3377 IND 0 6 9 5 0 6 1 6 0
Phone Number EPA Number

Hauler Name Hauler Address
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
American Chemical 420 S. Colfax Avenue 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 46
Griffith IN 46319 219-769-3400 IND 0 1 6 3 6 0 2 6 5
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATORWASTE NAME: Flammable Paint SolventsWASTE PHASE: Liquid

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

Flammable1UN 1993

UN or NA Number

E005

EPA HW Number

WEIGHT FOR
D.O.T. USELBS
TONS (circle one)WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.QUANTITY OF WASTE DELIVERED: 005000GALLONS (circle One)
2 CU. YDS.

53

METHOD OF SHIPMENT (Circle One)

(DRUMS _____)
NumberTANK TRUCK

OPEN TRUCK

OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION.

J. Berulle
(Authorized Signature)DATE: 8-25-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED.

(1) Tom Berry
(Authorized Signature)
(2) _____
(Authorized Signature)

DATE: 08/25/82
54 59
DATE: 1/1/

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

W. Adams
(Authorized Signature)DATE: 08/25/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS: _____

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

IN ILLINOIS: 217 / 782-3637
DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

TO DTR T-63 6PM 8-25-82

002215

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541444

Authorization Number

BEE CHEMICAL COMPANY 2700 E. 170th St. 312-474-7000
(Company Name) Address Phone Number

0 3 1 1 5 9 0 0 0 4 G
14 Generator Number 24

Lansing, IL 60438
City State Zip

I L D 0 0 5 2 2 9 4 4 8
EPA Number

WASTE HAULER(S)

Mr. Frank, Inc.
Hauler Name

201 W. 155th St.
South Holland, IL
Hauler Address

S.W.H. Registration Number 6079009
31

312-596-3377
Phone Number

IND 0 6 9 5 0 6 1 6 0
EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

Phone Number

EPA Number

American Chemical
(Facility Name)

420 S. Colfax Avenue
Address

9 1 8 0 8 9 0 2
39 Site Number 46

Griffith
City

IN
State

46319
Zip

219-769-3400
Phone Number

IND 0 1 6 3 6 0 2 6
EPA Number

Alternate (Facility Name)

Address

39 Site Number 46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Flammable Paint Solvents

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Flammable

1

UN 1993
UN or NA Number

7005
EPA HW Number

WEIGHT FOR
D.O.T. USE

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED:

005000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 9-1-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) Tom Barry
(Authorized Signature)

DATE: 09/01/82

(2) _____
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 9/1/82

COMMENTS OR SPECIAL INSTRUCTIONS:

782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

PART 1 GENERATOR

PART 2 IEPA

PART 3 SITE

PART 4 HAULER

PART 5 IEPA

PART 6 GENERATOR

SITE COPY - PART 3

TC121K T-63 6PM 9.1.82

002216

**TO BE COMPLETED BY
WASTE GENERATOR**

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541445

Authorization Number 8 13

Bee Chemical Co 2200 E 170TH ST 312 474 7000 0311590004
(Company Name) Address Phone Number Generator Number
Lansing Ill IL 0005229448
City State Zip EPA Number
WASTE HAULER(S)

MR Frank 201 W 155th ST 312 5863377 0079022
Hauler Name Hauler Address Phone Number S.W.H. Registration Number
50 Holland Ill IL 0069506160
Hauler Name Hauler Address Phone Number S.W.H. Registration Number
EPA Number

American Chemical 420 S. Calfax 312 7683490 91808902
(Facility Name) Address Phone Number Site Number
Griffith Ind IN 001630265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Phone Number Site Number
City State Zip Phone Number EPA Number

**TO BE COMPLETED BY
WASTE GENERATOR**
WASTE NAME: Flammable Paint Solvent WASTE PHASE: Liquid
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
SHIPPING DESCRIPTION: Flammable HAZARD CLASS: UN 1993 EPA HW Number: F005
WEIGHT FOR D.O.T. USE: _____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 003000 1 GALLONS (Circle One) 1 CU. YDS.
METHOD OF SHIPMENT (Circle One) (DRUMS _____) TANK TRUCK OPEN TRUCK OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION X R. Frank DATE: 9/10/82
(Authorized Signature)

WASTE HAULER
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:
(1) Ronald Bridgewater DATE: 9/10/82
(Authorized Signature) 54 59
(2) _____ DATE: _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:
Ample DATE: 9/10/82
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

STATE OF ILLINOIS

0416919

TO BE COMPLETED BY
WASTE GENERATORENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

Authorization Number 8 13

Bee Chemical Co 500 State St 312 7580500 0310450010 G
(Company Name) Address Phone Number Generator Number
IL0089828016
EPA Number

WASTE HAULER(S)
Mr. Imke, Inc 201 W. 155th St 312 5963377 IL0069506160
Hauler Name Hauler Address Phone Number EPA Number
South Holland, IL 60473
S.W.H. Registration Number 0079009
EPA Number 31

Hauler Name Hauler Address Phone Number EPA Number
S.W.H. Registration Number 32
City State Zip
American Chemical P.O. Box 190 918 08902
(Facility Name) Address Site Number
Griffith Ind 46319 IND016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR
WASTE NAME: Dirty One & Solvent WASTE PHASE: Liquid
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
(Liquid, Gaseous, Solid)
SHIPPING DESCRIPTION: Tank Truck HAZARD CLASS: Flammable UN1993 F003
UN or NA Number EPA HW Number
WEIGHT FOR D.O.T. USE _____ LBS _____ TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 005000 1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One) (DRUMS _____) TANK TRUCK OPEN TRUCK OTHER (Specify) _____
Number

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 9/16/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [Signature]
(Authorized Signature)DATE: 09/16/82
54 59(2) [Signature]
(Authorized Signature)DATE: 1/1/

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 9/16/82
59 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 125 F T-63 6PM 9/16/82
002218

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541446

Authorization Number XXXXXXXXXXXX
8 13

Bee Chemcial Company 2700 E. ~~20th~~ ^{170th} St. 312-474-7000 0 3 1 1 5 9 0 0 0 4
(Company Name) Address Phone Number
Lansing IL ~~60438~~ ⁶⁰⁴³⁸
City State Zip
Generator Number 14 24
EPA Number 1 1 4 0 0 5 2 2 9 4 4 8

WASTE HAULER(S)
Mr. Frank, Inc. 201 W. 155th St.
Hauler Name Hauler Address
312-596-3377
Phone Number
S.W.H. Registration Number 0079018
25 31
IND 0 6 9 5 06 1 6 0
EPA Number
S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
American Chemical 420 S. Colfax Avenue 9 1 8 0 8 9 0 2
(Facility Name) Address
Griffith IN 46319 219-769-3400 IND 0 1 6 3 6 0 2 6 5
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Flammable Paint Solvents WASTE PHASE: Liquid
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

Flammable

1

UN 1993

UN or NA Number

F203
EPA HW Number

WEIGHT FOR
D.O.T. USE

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000 1 GALLONS (circle One)
47 52 53

METHOD OF SHIPMENT (Circle One)

(DRUMS _____)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

R. Parish
(Authorized Signature)

DATE: 9.16.82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) CEM O'Brien
(Authorized Signature)

DATE: 09/16/82
54 59

(2) _____
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

TD Infee
(Authorized Signature)

DATE: 9.16.82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 121K T-63 GRM 9.16.82

002219

**TO BE COMPLETED BY
WASTE GENERATOR**

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541447

Authorization Number 8 13

BEE CHEMICAL COMPANY 2700 E. 170th St. 312-474-7000 0 3 1 1 5 9 0 0 0 4
(Company Name) Address Phone Number 14 Generator Number 24
Lansing IL 60438 I L D 0 0 5 2 2 9 4 4 8
City State Zip EPA Number

MR. FRANKS, INC. 201 W. 155th St. 312-596-3377 IND 0 6 9 5 0 6 1 6 0
Hauler Name Hauler Address Phone Number EPA Number
S.W.H. Registration Number 0 0 7 9 0 0 8

Hauler Name Hauler Address Phone Number EPA Number
S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL 420 S. Colfax Avenue 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 46
Griffith IN 46319 219-769-3400 IND 0 1 6 3 6 0 2 6 5
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

**TO BE COMPLETED BY
WASTE GENERATOR**

WASTE NAME: **Flammable Paint Solvents** WASTE PHASE: **Liquid**
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: **Flammable** HAZARD CLASS: **1** UN 1993
EPA HW Number

WEIGHT FOR LBS WEIGHT FOR I.E.P.A. USE MUST BE QUANTITY OF WASTE DELIVERED: 0 0 5 0 0 0 1 GALLONS (Circle One)
D.O.T. USE TONS (circle one) CONVERTED TO CU. YDS. OR GAL. 47 52 2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One) (DRUMS) TANK TRUCK OPEN TRUCK OTHER (Specify) 9/24/82

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION DATE: 9-24-82
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) **Donald H. Built** DATE: 09/24/82
(Authorized Signature) 54 59

(2) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

W. H. Haffee DATE: 9/24/82
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR
REV. # 3

SITE COPY - PART 3 TO 121 R T-63 612M 9.24.82 002220

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541448

Authorization Number 8 13

BEE CHEMICAL COMPANY 2700 E. 170th St. 312-474-7000 0 3 1 1 5 9 0 0 0 4 G
(Company Name) Address Phone Number 14 Generator Number 24
Lansing IL 60438 I L D 0 0 5 2 2 9 4 4 8
City State Zip EPA Number

WASTE HAULER(S)

Mr. Frank, Inc. 201 W. 155th St. 312-596-3377 0079/019
Hauler Name Hauler Address Phone Number IND 0 6 9 5 0 6 1 6 0
S.W.H. Registration Number 25 EPA Number

Hauler Name Hauler Address Phone Number EPA Number
S.W.H. Registration Number 32

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE

American Chemical co. 420 S. Coffax Avenue 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 46
Griffith IN 46319 219-769-3400 IND 0 1 6 3 6 0 2 6 5
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: EXFlammable Paint Solvents WASTE PHASE: Liquid
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)
SHIPPING DESCRIPTION: HAZARD CLASS: UN 1993
Flammable 1 UN or NA Number EPA HW Number

WEIGHT FOR LBS WEIGHT FOR I.E.P.A. USE MUST BE QUANTITY OF WASTE DELIVERED: 004500 1 GALLONS (Circle One)
D.O.T. USE TONS (circle one) CONVERTED TO CU. YDS. OR GAL. 47 52 2 CU. YDS. 53
METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION (Authorized Signature) DATE: 9/29/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Tom Berry (Authorized Signature) DATE: 09/29/82
(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY HAZARDOUS WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE: 92982
(Authorized Signature) DATE: 00 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 1217 7-63 6PM 9-29-82

002221

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541449

Authorization Number 8 13

BEE CHEMICAL CO. 2700 E. 170th St. 219-474-7000 0 3 1 1 5 9 0 0 0 4 G
(Company Name) Address Phone Number 14 Generator Number 24
LANSING IL 60438 I L D 0 0 5 2 2 9 4 4 8
City State Zip EPA Number

Mr. Frank, Inc. 201 W. 155th St. WASTE HAULER(S)
South Holland, IL
Hauler Name Hauler Address
312-596-3377
Phone Number
S.W.H. Registration Number 0079018
IND 0 6 9 5 0 6 1 80
x312-596-3377
EPA Number

Hauler Name Hauler Address
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
American Chemical co. 420 S. Colfax Avneue 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 46
Griffith IN 46319 219-769-3400 IND 0 1 6 3 6 0 2 6 5
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Flammable Paint Solvents WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
SHIPPING DESCRIPTION: HAZARD CLASS: UN 1993
Flammable 1 UN 1993
EPA HW Number F005

WEIGHT FOR D.O.T. USE 36,500 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 20,450.0 52 1 GALLONS (Circle One) 2 CU. YDS. 1 53

METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Russell Ranch DATE: 10-5-82
(Authorized Signature)

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:
(1) Robert Curtis DATE: 10/05/82
(Authorized Signature) 54 59
(2) DATE: 11/1/82
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES NO X
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE
Hunfee DATE: 10/5/82
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR
REV # 3

SITE COPY - PART 3

TO 121 RT-63 GRM

10-5-82 002222

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541450
1 7

Authorization Number 8 13

BEE CHEMICAL CO. 2700 E. L70 TH ST. 312-474-7000 0311590004
(Company Name) Address Phone Number 14 Generator Number 24

LANSING IL 60438 ILD005229448
City State Zip EPA Number

WASTE HAULER(S)
EX MR. FRANK, INC. 201 W. 155TH ST. SOUTH HOLLAND, IL
Hauler Name Hauler Address

312-596-3377 IND 069506160
Phone Number EPA Number

S.W.H. Registration Number 32 38

AMERICAN CHEM GRIFFITH 420 S. COLfax
(Facility Name) Address

GRIFFITH IN 7683480 91808902
City State Zip Phone Number Site Number

Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: FLAMMABLE PAINT SOLVENT WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

FLAMMABLE

1

UN1993
UN or NA Number

EPA HW Number

WEIGHT FOR D.O.T. USE LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000 1 GALLONS (Circle One) CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 10-14-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) (Authorized Signature)

DATE: 10/14/82

(2) (Authorized Signature)

DATE: 10/14/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 10/14/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

T0121K.T-63 GPM 10-14-82 002223

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0416921

Authorization Number 8 13

Bee Chemical Co 500 State St 3127580500 0310450010
(Company Name) Address Phone Number Generator Number
IL 089828016
City State Zip EPA Number

M. Frank Inc. 201 W. 155th St
Hauler Name Hauler Address
South Holland, IL 3125963377
60473 Phone Number
S.W.H. Registration Number 0079009
EPA Number IL0069506160

American Chemical P.O. Box 190
(Facility Name) Address
Shifflet Ind. 46319
City State Zip Phone Number
Alternate (Facility Name) Address
EPA Number 91808902
Site Number IND016360365

TO BE COMPLETED BY
WASTE GENERATOR
WASTE NAME: Dirty Ink & Solvent WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
SHIPPING DESCRIPTION: Truck Truck HAZARD CLASS: Flammable UN1993 E003
UN or NA Number EPA HW Number
WEIGHT FOR D.O.T. USE _____ LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 605000 1 GALLONS (Circle One)
47 52 53

METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)
THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION
James Stant DATE 10/12/82
(Authorized Signature)

WASTE HAULER
Donald B. Buck
(Authorized Signature)
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:
(1) _____ DATE 10/12/82
(2) _____ DATE _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY: IL 089828016 HAZARDOUS WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:
IL 089828016 DATE 10/12/82
(Authorized Signature)

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

**TO BE COMPLETED BY
WASTE GENERATOR**

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541451

Authorization Number 8

Bee Chemical 2600 E 170th 312-474-7000 0311590004
(Company Name) Address Phone Number Generator Number
Lansing IL 60438 ILD005229448
City State Zip EPA Number

WASTE HAULER(S)

M. Frank, Inc South Holland, IL 312-596-3377 0079 009
Hauler Name Hauler Address Phone Number S.W.H. Registration Number
14D 069506160
EPA Number

Hauler Name Hauler Address Phone Number S.W.H. Registration Number EPA Number

American Chemical 420 S. Calfax 91808902
(Facility Name) Address Site Number
Elmhurst IN 46319 3127683400 14D 016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

**TO BE COMPLETED BY
WASTE GENERATOR**

WASTE NAME Flammable Paint Solvent WASTE PHASE Liquid
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
SHIPPING DESCRIPTION: Flammable HAZARD CLASS: 1 UN OR NA-Number UN 1993 EPA HW Number E005

WEIGHT FOR D.O.T. USE LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 004800 1 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION J. Benello DATE: 10-21-82
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

Donald H. Burt DATE: 10/21/82
(Authorized Signature) 54 59
(2) (Authorized Signature) DATE: 11/1/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES X NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

J. Drafce DATE: 10 21 82
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR
REV. # 3

SITE COPY - PART 3 TO 121K T-63 6/11 10-21-82

002225

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541452

Authorization Number 8 13

BEE CHEMICAL CO.
(Company Name)

2700 E. 170th St.
Address

312-474-7000
Phone Number

0 3 1 1 5 9 0 0 0 4 G
14 Generator Number 24

LANSING
City

IL
State

60438
Zip

I L D 0 0 5 2 2 9 4 4 8
EPA Number

WASTE HAULER(S)

MR. FRANK, INC.
Hauler Name

South Holland, IL
Hauler Address

S.W.H. Registration Number 0079029
25 31

312-596-3377
Phone Number

I L D 0 6 9 5 0 6 1 60
EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL
(Facility Name)

420 S. Colfax Avenue
Address

9 1 8 0 8 9 0 2
39 Site Number 46

GRIFFITH,
City

IN
State

46319
Zip

219-769-3400
Phone Number

IND 0 1 6 3 6 0 2 6 5
EPA Number

Alternate (Facility Name)

Address

39 Site Number 46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Flammable Paint Solvent

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

1 9 9 3

U N 1x2x6x8
UN or NA Number

EPA HW Number

Flammable

1

WEIGHT FOR
D.O.T. USE

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED:

004500
52

1 GALLONS (Circle One)
2 CU. YDS. 1
53

METHOD OF SHIPMENT (Circle One)

(DRUMS _____)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 10-28-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) (Authorized Signature)

DATE: 10/28/82
54 59

(2) (Authorized Signature)

DATE: 10/28/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature)

DATE: 10/28/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

IN ILLINOIS: 217 / 782-3637

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 121K T-63 GRM 10-28-82 002226

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706

(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

Authorization Number 8 13

0416922

Bee Chemical 500 State St 3127580500 0310450010
(Company Name) Address Phone Number Generator Number
City State Zip IL0089828016
EPA Number

WASTE HAULER(S)

Mr. Frank Inc 201 W. 155th St 3125963377 IL0069506160
Hauler Name Hauler Address Phone Number EPA Number
City State Zip S.W.H. Registration Number 25 31

Hauler Name Hauler Address Phone Number EPA Number
S.W.H. Registration Number 32 38

American Chemical P.O. Box 190 46319317683400 IND0016360265
(Facility Name) Address City State Zip Phone Number EPA Number
City State Zip S.W.H. Registration Number 39 46
Alternate (Facility Name) Address City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME Dirty Ink & Solvent WASTE PHASE Liquid
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
SHIPPING DESCRIPTION: Tank Truck HAZARD CLASS: Flammable UN or NA Number UN1993 EPA HW Number F003

WEIGHT FOR D.O.T. USE LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 005201 1 GALLONS (Circle One) 1 CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Mary Jane
(Authorized Signature)

DATE: 11/3/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Miguel Garcia
(Authorized Signature)
(2) _____
(Authorized Signature)

DATE: 11/03/82
DATE: 11/03/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

F. Hump
(Authorized Signature)

DATE: 11/03/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

TU 125KT-63 6PM 11.3.82

002227

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541453

Authorization Number 8 13

BEE CHEMICAL COMPANY 2700 E. 170th St. - 312-474-7000 0 3 1 1 5 9 0 0 0 4
(Company Name) Address Phone Number 14 Generator Number 24
Lansing, IL 60438 I L D 0 0 5 2 2 9 4 4 8
City State Zip EPA Number

WASTE HAULER(S)

Mr. Frank, Inc. 201 W. 155th St. S.W.H. Registration Number 0079021
South Holland, IL Hauler Address 31 Hauler Name 31
312-596-3377 I L D 0 6 9 5 0 6 1 6
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical 420 S. Colfax Avenue 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 46
Griffith IN 60438 769-3400 IND 0 1 6 3 6 0 2 6 5
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Flammable Paint Solvents

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Flammalbe

1

UN 1993

UN or NA Number

F805

EPA HW Number

WEIGHT FOR
D.O.T. USE

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

47

52

53

GALLONS (Circle One)
CU. YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

9 1 8 0 8 9 0 2
(Authorized Signature)

DATE: 11-8-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) Tom B. [Signature]
(Authorized Signature)

DATE: 11/08/82

(2) [Signature]
(Authorized Signature)

DATE: 11/08/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[Signature]
(Authorized Signature)

DATE: 11/8/82

COMMENTS OR SPECIAL INSTRUCTIONS:

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

TO 121 R T-63 EPM 11.8.82

002228

002229

**TO BE COMPLETED BY
WASTE GENERATOR**

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY,
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0662947

Authorization Number 8 13

Bema Film Systems Inc. 744 N. Oaklawn Ave. 312-279-7800 ,0 4 3 0 3 5 0 0 1 1 G
(Company Name) Address Phone Number
Elmhurst Illinois 60126 I T 1 8 0 0 1 4 8 7 0
City State Zip EPA Number

WASTE HAULER(S)

Landgrebe Truck Lines PO Box 31 Valparaiso, IN 46383 S.W.H. Registration Number **I ECC 2 9 8 0**
Hauler Name Hauler Address
White **NO 3 1 2-8 4 2-3 1 2 1** **IND 0 0 9 8 4 2 8 2**
Phone Number EPA Number

Hauler Name Hauler Address
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Services PO Box 190 2 4 6 9 0 1 8 0 8 9 0 2
(Facility Name) Address
Griffith Indiana 46319 219-924-4370 **IND 016360265**
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number

**TO BE COMPLETED BY
WASTE GENERATOR**

WASTE NAME: **Spent Solvents** WASTE PHASE: **Liquid**
(Liquid, Gaseous, Solid)
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
SHIPPING DESCRIPTION: **Solvents NOS** **Flamable** **N A 1 9 9 3** **F 0 0 3**
UN or NA Number EPA HW Number

WEIGHT FOR D.O.T. USE **10850** LBS TONS (Circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: **1 1 9 6** 47 52 53
METHOD OF SHIPMENT (Circle One) **DRUMS 28** TANK TRUCK OPEN TRUCK OTHER (Specify) **Van Trailer**

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

George Cortese
(Authorized Signature)

DATE: **7/23/82**

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *Metaphase Motion*
(Authorized Signature)
(Authorized Signature)

DATE: **7/23/82**
54 59
DATE: **7/24/82**
60 65

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE: YES NO ☒

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Thompson
(Authorized Signature)

DATE: **7/24/82**
60 65

NOTES OR SPECIAL INSTRUCTIONS:

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

217 / 782-3637

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

SITE COPY - PART 3

70 210 E 7-50 6141 726-82

002230

STATE OF ILLINOIS

0416923

TO BE COMPLETED BY
WASTE GENERATORENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

Authorization Number 8 13

SPECIAL WASTE HAULING MANIFEST

Bee Chemical Co. 500 State St. 3127580500 0310450010
(Company Name) Address Phone Number Generator Number

IL0089828016
EPA Number

City State Zip

WASTE HAULER(S)

Mr. Frank 201 W. 155th St. 3125963377 0079029
Hauler Name Hauler Address Phone Number S.W.H. Registration Number
South Holland, IL 60473 IL0069506160
EPA Number

Hauler Name Hauler Address S.W.H. Registration Number 32 38

Phone Number EPA Number

American Chemical P.O. Box 190 91808902
(Facility Name) Address Site Number
Griffith Ind. 46319 IND016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number 39 46

City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME Dirty Ink & Solvent WASTE PHASE Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: Tank Truck HAZARD CLASS: Flammable UN1993 F003
UN or NA Number EPA HW Number

WEIGHT FOR LBS WEIGHT FOR I.E.P.A. USE MUST BE QUANTITY OF WASTE DELIVERED: 005000 1 GALLONS (Circle One)
D.O.T. USE TONS (circle one) CONVERTED TO CU. YDS. OR GAL. 47 52 CU. YDS. 53

METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION X John Stutz DATE: 11/23/82
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED.

(1) Ronald B. Bridgewater DATE: 11/23/82
(Authorized Signature) 54 59
(2) _____ DATE: _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES ☐ NO ☒

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 11/23/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR
REV. # 3

SITE COPY - PART 3

TO 124K T-63 GKM 11-2382

002231

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541455

Authorization Number 8 13

BEE CHEMICAL COMPANY 2700 E. 170th St. 312-474-7000 0 3 1 1 5 9 0 0 0 4 6
(Company Name) Address Phone Number 14 Generator Number 24
Lansing, IL 60438 I L D 0 0 5 2 2 9 4 4 8
City State Zip EPA Number

MR. FRANK, INC. 201 W. 155th St.
~~AMERICAN CHEMICAL~~ South Holland, IL
Hauler Name Hauler Address
312-596-3377 I L D 0 6 9 5 0 6 1 6 0
Phone Number EPA Number
Hauler Name Hauler Address
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
American Chemical 420 S. Colfax Avenue 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 40
Griffith IN 60438 769-3400 IND 0 16 3 6 0 2 6 5
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 Site Number 40
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Flammable Paint Solvents WASTE PHASE: Liquid
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)
SHIPPING DESCRIPTION: HAZARD CLASS: UN 1993 FODS
Flammable 1 UN or NA Number EPA HW Number
WEIGHT FOR D.O.T. USE 40000 TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 604500 1 GALLONS (Circle One) 2 CU. YDS. 53
METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Russell Conish
(Authorized Signature)

DATE: 12/9/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *M. J. Martin*
(Authorized Signature)
(2) *[Signature]*
(Authorized Signature)

DATE: 12/09/82
DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO ☒

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[Signature]
(Authorized Signature)

DATE: 12/09/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR
REV. # 3

SITE COPY - PART 3

TO 121 E T-63 GRM 12-9-82

002232

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0541456
1 7

Authorization Number 8 13

BEE CHEMICAL COMPANY 2700 E. 170th St. 312-474-7000
(Company Name) Address Phone Number

0 3 1 1 5 9 0 0 0 4 G
14 Generator Number 24

Lansing IL 60438
City State Zip

I L D 0 0 5 2 2 9 4 4 8
EPA Number

Mr. Frank, Inc. 201 W. 155th St.
South Holland, IL
Hauler Name Hauler Address

WASTE HAULER(S)

S.W.H. Registration Number 0079018
31

312-596-3377
Phone Number

I L D 0 6 9 5 0 6 1 6
EPA Number

Hauler Name Hauler Address

S.W.H. Registration Number 32 38

Phone Number

EPA Number

AMERICAN CHEMICAL 420 S. Colfax Avenue
(Facility Name) Address

9 1 8 0 8 9 0 2
39 Site Number 46

Griffith IN 46319 769-3400
City State Zip Phone Number

IND 0 1 6 3 6 0 2 6 5
EPA Number

Alternate (Facility Name)

Address

39 Site Number 46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Flammable Paint Solvents

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Flammable

1

UN 1993
UN or NA Number

EPA HW Number

WEIGHT FOR
D.O.T. USE

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 604500

1 GALLONS (Circle One)
CU. YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS _____)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 11-17-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 11/17/82

(2) (Authorized Signature)

DATE: 11/17/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY:

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 11/17/82

COMMENTS OR SPECIAL INSTRUCTIONS:

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

REV. # 3

SITE COPY - PART 3

To 121K 7-63 6KM 12-17-82

002233

STATE OF ILLINOIS

TO BE COMPLETED BY
WASTE GENERATORENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0416908

Authorization Number

997231

Bee Chemical Co. 500 State St 3127580500 0310450010
(Company Name) Address Phone Number Generator Number
Chicago Heights IL 60411 IL0089828016
City State Zip EPA Number

WASTE HAULER(S)

Mr. Frank, Inc. 201 W. 155th St. 3125963377 IL0069506160
Hauler Name Hauler Address Phone Number EPA Number
South Holland, IL 60473
City State Zip

S.W.H. Registration Number

32

38

Phone Number

EPA Number

American Chemical P.O. Box 190 91808902
(Facility Name) Address Site Number
Griffith Ind. 46319 IND016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME

WASTE PHASE

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION

HAZARD CLASS

(Liquid, Gaseous, Solid)

Drum Truck Flammable UN1993 F003
UN or NA Number EPA HW Number

WEIGHT FOR
D.O.T. USELBS
TONS (circle one)WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED:

005000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS

Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE:

1/27/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:(1) [Signature]
(Authorized Signature)

DATE:

11/37/82

(2) [Signature]
(Authorized Signature)

DATE:

1/1/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ☒

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Bob Mauck
(Authorized Signature)

DATE:

11/32/82

COMMENTS OR SPECIAL INSTRUCTIONS:

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

TO 125 K T-63 6PM 1/27/82

002234

**TO BE COMPLETED BY
WASTE GENERATOR**

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0416912

Authorizing Number 997231

Bee Chemical Co. 500 State St. 312 7580500 0310450010
(Company Name) Address Phone Number Generator Number

ILD089828016
EPA Number

City State Zip
WASTE HAULER(S)

Mr. Frank Inc. 201 W. 155th
Hauler Name Hauler Address
South Holland, IL
60473

S.W.H. Registration Number 0079009

3125963377
Phone Number

ILD069506160
EPA Number

Hauler Name Hauler Address

S.W.H. Registration Number 32

Phone Number

EPA Number

American Chemical P.O. Box 190
(Facility Name) Address
Ind 46319
City State Zip

91808902
Site Number

Ind 46319
City State Zip

IND016360265
EPA Number

Alternate (Facility Name) Address
City State Zip

Site Number
EPA Number

**TO BE COMPLETED BY
WASTE GENERATOR**

WASTE NAME Waste Ink & Solvent

WASTE PHASE Liquid

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS.

Ink Truck

Flammable

UN1993
UN or NA Number

F003
EPA HW Number

WEIGHT FOR
D.O.T. USE

LBS

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0.05000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS _____)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Harry Stant
(Authorized Signature)

DATE: 3/1/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Tom Berry
(Authorized Signature)

DATE: 03/01/82

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

J. D. Amflee
(Authorized Signature)

DATE: 3/1/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

TO 125 K T-63 6PM 3/1/82

002235

STATE OF ILLINOIS

TO BE COMPLETED BY
WASTE GENERATORENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0416909

Authorization Number 997231
8 13

Bee Chemical Co 500 State St 3127580500 0310450010
(Company Name) Address Phone Number Generator Number
Chicago Heights IL 60411 IL0089828016
City State Zip EPA Number

WASTE HAULER(S)

Mr Franko Inc 201 W. 155th St 3125963377 IL006950660
Hauler Name Hauler Address Phone Number EPA Number
South Holland, IL 60473

S.W.H. Registration Number 0079009
25 31S.W.H. Registration Number _____
32 38

Phone Number

EPA Number

American Chemical P.O. Box 190 91808902
(Facility Name) Address Site Number
Shillito Ind 416319 IND016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATORWASTE NAME: Dirty Ink & SolventWASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

TruckFlammableUN1993
UN or NA NumberF003
EPA HW NumberWEIGHT FOR
D.O.T. USELBS
TONS (circle one)WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.QUANTITY OF WASTE DELIVERED: 005000
47 521 GALLONS (Circle One)
2 CU. YDS. 1 53

METHOD OF SHIPMENT (Circle One)

(DRUMS _____)
NumberTANK TRUCK

OPEN TRUCK

OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

May Stout
(Authorized Signature)DATE: 3/16/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:(1) Tom Berry
(Authorized Signature)DATE: 03/16/82
54 59(2) _____
(Authorized Signature)DATE: 1/1/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Dumfee
(Authorized Signature)DATE: 3/16/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV # 3

SITE COPY - PART 3

To 124K T-63 6RM 3/16/82
002236

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste (OTHER)

MI 0108000

IDENTIFICATION	Generator's Name Bofors Lakeway, Inc.	Primary Transporter's Name Chemical Waste Management, Inc.	Treatment, Storage or Disposal Facility American Chemical Services
	Site Address 5025 Evanston Avenue Muskegon, MI 49443	Transporters Address P.O. Box 1296 Calumet City, IL 60409	Facility Address Griffith, IN 46319
	Phone Number (616) 788-2341	Phone Number (312) 568-3400	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MI D000260893	Transporter's EPA I.D. Number IL T180011850	Facility Site EPA I.D. Number IN D016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES	LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Weight or Volume	Units	Hazardous Waste Number
						No.	Type	Solid	Liquid	Gas	Sludge			
	1.	Waste Toluene Solu. Flammable liquid	Flammable	UN1294	07				X			145.00	Gal.	F 005
	2.													
	3.													
	4.													
	5.													
	6.													

COMMENTS	Include Safety precautions and special handling instructions.
	Wear rubber gloves, boots, and eye protection

TRANSPORTER COMPLETES	GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.		Generator Signature ① <i>Ray Bowman</i>	Date Shipped MO. DAY YEAR 11 29 82
	HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.	Transporter Vehicle I.D. No. No. 1 <i>7</i>	Transporter Signature ② <i>J. Lewis</i>	Date(s) Received 11 29 82
		Subsequent Transporter Vehicle I.D. No's	Subsequent transporter(s) signature(s) ③	
		If the shipment cannot be delivered, describe the reasons for non-delivery.		

TSDF COMPLETES	TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.	TSDF Signature ④ <i>KEP M/K</i>	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Rejected	Date Received 01 29 82
		Facility Site EPA I.D. Number IND0116360265		
Describe any significant discrepancies between manifest and shipment.				

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800-294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800-424-8802

TSDF COPY

TO 211 R T-506RM 1/29/82

002237

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste (OTHER)

MI 0107753

IDENTIFICATION	Generator's Name Bofors Lakeway, Inc.	Primary Transporter's Name Chemical Waste Management, Inc.	Treatment, Storage or Disposal Facility American Chemical Services
	Site Address 5025 Evanston Ave. Muskegon, MI. 49443	Transporters Address P.O. Box 1296 Calumet City, IL 60409	Facility Address Griffith, IN 46319
	Phone Number (616) 788-2341	Phone Number (312) 568-3400	Phone Number (219) 924-3470
	Generator's Site EPA I.D. Number M I D 0 0 6 0 3 0 3 7 3	Transporter's EPA I.D. Number I L T 1 8 0 0 1 1 8 5 0	Facility Site EPA I.D. Number I N D 0 1 6 3 6 0 2 6 5

002238

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES	LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Weight or Volume	Units	Hazardous Waste Number
						No.	Type	Solid	Liquid	Gas	Sludge			
	1.	Waste Toluene Solu. Flammable Liquid	Flammable	UN 1294	07				X			5500	Gal	F 0 0 5
	2.													
	3.													
	4.													
	5.													
	6.													

COMMENTS	Include Safety precautions and special handling instructions.
	Wear rubber gloves, boots, and eye protection

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.		Generator Signature ① <i>M. W. Kopp</i>	Date Shipped MO DAY YEAR 01 1 5 8 2
HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.	Transporter Vehicle I.D. No. No. 1 Subsequent Transporter Vehicle I.D. No's	Transporter Signature ② <i>D. Lewis</i> Subsequent transporter(s) signature(s) ③	Date(s) Received 01 1 5 8 2

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.	TSDF Signature ④ <i>A. M. Lee</i> Facility Site EPA I.D. Number I N D 0 1 6 3 6 0 2 6 5	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Rejected	Date Received 1 1 5 8 2
---	--	---	----------------------------

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800-294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800-424-8802

TO 210 R T-50 GEM 1/15/82 TSDF COPY

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste☐ Other

MI 0184761

IDENTIFICATION	Generator's Name Bofors Lakeway Inc.	Primary Transporter's Name Chemical Waste Management Inc.	Treatment, Storage or Disposal Facility American Chemical Service
	Site Address 5025 Evanston Ave. Muskegon, MI 49443	Transporters Address 4300 W 123 ST. Alsip IL 60658	Facility Address Griffith, Ind. 46319
	Phone Number 616) 788 2341	Phone Number (312) 396 1060	Phone Number (219) 924 4370
	Generator's Site EPA I.D. Number M I D 0 0 6 0 3 0 3 7 3	Transporter's EPA I.D. Number L T 1 8 0 0 1 1 8 5 0	Facility Site EPA I.D. Number N D 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Gas	Sludge			
1.	Waste Toluene solu. flammable liquid	Flammable	UN 12940	17				X			14500	gal	F 10105
2.													
3.													
4.													
5.													
6.													

Include Safety precautions and special handling instructions.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature

Date Shipped
MO. DAY YEAR① *Jim Duplissis*

2.5.82

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

 Transporter
Vehicle I.D. No. **No. 1 7**
Subsequent
Transporter
Vehicle I.D. No's

Transporter Signature

Date(s) Received

② *D. Lewis*

2.5.82

③ Subsequent transporter(s) signature(s)

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature

④ *Bob March*
☒ Accepted
☐ Rejected

Date Received

Facility Site EPA I.D. Number

IND 011631601265

020382

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed?

☐ Yes
☒ No

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

 TO 212 RT-50 GRM 2/5/82
 TSDF COPY

002239

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste☐ Other

MI0184838

IDENTIFICATION	Generator's Name Bofors Lakeway, Inc.	Primary Transporter's Name Chemical Waste Management, Inc.	Treatment, Storage or Disposal Facility American Chemical Services
	Site Address 5025 Evanston Avenue Muskegon, MI 49443	Transporters Address P.O. Box 1296 Calumet City, IL 60409	Facility Address Griffith, IN 46319
	Phone Number (616) 788-2341	Phone Number (312) 568-3400	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MI D 0 0 0 2 6 0 8 9 3	Transporter's EPA I.D. Number IL T 1 8 0 0 1 1 8 5 0	Facility Site EPA I.D. Number IN D 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Gas	Sludge			
1.	Waste Toluene Solu. Flammable liquid	Flammable	UN1294	07			X				4500	Gal.	F101015
2.													
3.													
4.													
5.													
6.													

COMMENTS	Include Safety precautions and special handling instructions.
	Wear rubber gloves, boots, and eye protection

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.	Generator Signature ① <i>Jim Duplassis</i>	Date Shipped MO. DAY YEAR 02/19/82
	Transporter Signature ② <i>[Signature]</i>	Date(s) Received 02/19/82
	Subsequent transporter(s) signature(s) ③	

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.	TSDF Signature ④ <i>Bob Ymauch</i>	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Rejected	Date Received 02/19/82
	Facility Site EPA I.D. Number IND 0 1 6 3 6 0 2 6 5		
Describe any significant discrepancies between manifest and shipment.	Was a Surcharge Assessed? <input type="checkbox"/> Yes <input type="checkbox"/> No		

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

TSDF COPY To 210 TR T-50 GRM 2/19/82

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste (OTHER)

MI 0107999

IDENTIFICATION	Generator's Name Bofors Lakeway, Inc.	Primary Transporter's Name Chemical Waste Management, Inc.	Treatment, Storage or Disposal Facility American Chemical Services
	Site Address 5025 Evanston Avenue Muskegon, MI 49443	Transporters Address P.O. Box 1296 Calumet City, IL 60409	Facility Address Griffith, IN 46319
	Phone Number (616) 788-2341	Phone Number (312) 568-3400	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MI D000260893	Transporter's EPA I.D. Number IL T180011850	Facility Site EPA I.D. Number IN D016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES	LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form			Weight or Volume	Units	Hazardous Waste Number
						No.	Type	Solid	Liquid	Gas			
	1.	Waste Toluene Solu. Flammable liquid	Flammable	UN1294	07			X			14500	Gal.	F 005
	2.												
	3.												
	4.												
	5.												
	6.												

COMMENTS	Include Safety precautions and special handling instructions.
	Wear rubber gloves, boots, and eye protection

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.	Generator Signature ① <i>Jim Duplass</i>	Date Shipped MO. DAY YEAR 03 10 582
---	---	---

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.	Transporter Vehicle I.D. No. No. 1 7	Transporter Signature ② <i>V. Lewis</i>	Date(s) Received 3 10 582
	Subsequent Transporter Vehicle I.D. No's	Subsequent transporter(s) signature(s) ③	

If the shipment cannot be delivered, describe the reasons for non-delivery:

TSDf CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.	TSDf Signature ④ <i>[Signature]</i>	Facility Site EPA I.D. Number IN D016360265	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Rejected	Date Received 3 5 82
--	--	--	---	-------------------------

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800-294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800-424-8802

TO 212K T-50 GRM TSDf COPY 3/5/82

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste☐ Other

MI 0184760

IDENTIFICATION 5025	Generator's Name Bofors Lakeway Inc.	Primary Transporter's Name Chemical Waste Management Inc.	Treatment, Storage or Disposal Facility American Chemical Service
	Site Address 5025 Evanston Ave. Muskegon, MI 49483	Transporters Address 4300 W. 123 St. Alsip IL 60658	Facility Address Griffith, Ind. 46319
	Phone Number (616) 788 2341	Phone Number (312) 396 1069	Phone Number (219) 924 4370
	Generator's Site EPA I.D. Number MI D 0 0 6 0 3 0 3 7 3	Transporter's EPA I.D. Number IL T 0 0 0 8 0 6 6 0 4	Facility Site EPA I.D. Number IN D 0 1 6 3 6 0 2 6 6

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Gas	Sludge			
1.	Waste Toluene solu. flammable liquid	Flammable	UN 12940	7				X			500.0	gal	F 0 0 5
2.													
3.													
4.													
5.													
6.													

COMMENTS	Include Safety precautions and special handling instructions.
	Wear rubber gloves, boots and eye protection

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.	Generator Signature <i>M. Lakeway</i>	Date Shipped MO. DAY - YEAR 3/19/82
--	--	---

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.	Transporter Vehicle I.D. No. No. 1	Transporter Signature <i>M. Lakeway</i>	Date(s) Received 3/19/82
	Subsequent Transporter Vehicle I.D. No's	Subsequent transporter(s) signature(s)	

If the shipment cannot be delivered, describe the reasons for non-delivery:

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.	TSDF Signature <i>M. Lakeway</i>	Accepted <input checked="" type="checkbox"/> Rejected <input type="checkbox"/>	Date Received 3/19/82
Facility Site EPA I.D. Number IN D 0 1 6 3 6 0 2 6 6			

Describe any significant discrepancies between manifest and shipment.	Was a Surcharge Assessed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	--

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4708 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER 800-424-8802 24 HOURS PER DAY.

To 210 R. T-50 60M 3/19/82
TSDF COPY

002242

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste☐ Other

MI 0184837

IDENTIFICATION	Generator's Name Bofors Lakeway, Inc.	Primary Transporter's Name Chemical Waste Management, Inc.	Treatment, Storage or Disposal Facility American Chemical Services
	Site Address 5025 Evanston Avenue Muskegon, MI 49443	Transporter's Address P.O. Box 1290 Calumet City, IL 60409	Facility Address Griffith, IN 46319
	Phone Number (616) 788-2341	Phone Number (312) 568-3400	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MI000002608080	Transporter's EPA I.D. Number IL00000806604	Facility Site EPA I.D. Number IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

MI00006030313 IL00000806604

GENERATOR COMPLETES

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form			Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Gas			
1.	Waste Toluene Solu. Flammable liquid	Flammable	UN1294	07			X			150.00	Gal.	F 0 0 5
2.												
3.												
4.												
5.												
6.												

COMMENTS	Include Safety precautions and special handling instructions.
	Wear rubber gloves, boots, and eye protection

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.	Generator Signature ① <i>CR9</i>	Date Shipped MO. DAY YEAR 05/12/82
--	-------------------------------------	--

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.	Transporter Vehicle I.D. No. No. 1 423	Transporter Signature ② <i>John Lindemeier</i>	Date(s) Received 05/12/82
	Subsequent Transporter Vehicle I.D. No's	Subsequent transporter(s) signature(s)	

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDf CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.	TSDf Signature ④ <i>[Signature]</i>	Accepted <input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Rejected	Date Received 5/12/82
--	--	---	--------------------------

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed?
☐ Yes
☒ No

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

TSDf COPY

To 210 RT-50 610M 5-12-82

002243

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste☐ Other

MI0184812

IDENTIFICATION	Generator's Name Bofors Lakeway, Inc.	Primary Transporter's Name Chemical Waste Management, Inc.	Treatment, Storage or Disposal Facility American Chemical Services.
	Site Address 5025 Evanston Ave. Muskegon, MI. 49443	Transporters Address 4300 W. 123rd St. Alsip, IL. 60658	Facility Address Griffith, Ind. 46319
	Phone Number (616) 788-2341	Phone Number (312) 396-1060	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MI D 0 0 6 0 3 0 3 7 3	Transporter's EPA I.D. Number XXXXXXXXXXXXXXX	Facility Site EPA I.D. Number IND 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

I L T 0 0 0 8 0 6 6 0 4

GENERATOR COMPLETES	LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
						No.	Type	Solid	Liquid	Gas	Sludge			
	1.	Waste Toluene solu. Flammable Liquid	Flammable	UN 1294	07				X			4590 Gal.		F 0 0 5
	2.													
	3.													
	4.													
	5.													
	6.													

COMMENTS	Include Safety precautions and special handling instructions.
	Wear rubber gloves, boots and eye protection

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.	Generator Signature <i>M. K. Lewis</i>	Date Shipped MO. DAY YEAR 03 31 82
--	---	--

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.	Transporter Vehicle I.D. No. No. 1 7	Transporter Signature <i>D. Lewis</i>	Date(s) Received 3 31 82
	Subsequent Transporter Vehicle I.D. No's	Subsequent transporter(s) signature(s)	

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.	TSDF Signature <i>J. D. Dwyer</i>	Date Received 3 31 82
	Facility Site EPA I.D. Number IND 0 1 6 3 6 0 2 6 5	

Describe any significant discrepancies between manifest and shipment.	Was a Surcharge Assessed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	---

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

TO 211 K T-50 6R 3-31-82 TSDF COPY

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste☐ Other

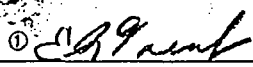
MI 0184813

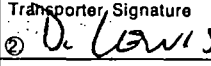
IDENTIFICATION	Generator's Name Bofoss Lakeway, Inc.	Primary Transporter's Name Chemical Waste Management, Inc.	Treatment, Storage or Disposal Facility American Chemical Services.
	Site Address 5025 Evanston Ave. Muskegon, MI. 49443	Transporters Address 4300 W. 123rd St. Alsip, IL. 60658	Facility Address Griffith, Ind. 46319
	Phone Number (616) 788-2341	Phone Number (312) 396-1060	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MI D006030373	Transporter's EPA I.D. Number IL X180018000	Facility Site EPA I.D. Number IND016360265
If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each: IL T000806604			

GENERATOR COMPLETES

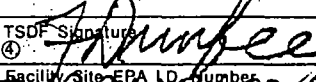
LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form			Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Gas			
1.	Waste Toluene solu. Flammable Liquid	Flammable	UN 1294	07			X			150.00	Gal.	F0015
2.												
3.												
4.												
5.												
6.												

COMMENTS	Include Safety precautions and special handling instructions. Wear rubber gloves, boots and eye protection.
----------	---

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA138. I further understand that this manifest may be used in administrative and court proceedings.	Generator Signature 	Date Shipped MO. DAY YEAR 04 03 82
---	--	---

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.	Transporter Vehicle I.D. No. No. 1 423 Subsequent Transporter Vehicle I.D. No's	Transporter Signature 	Date(s) Received 4 6 82
--	---	--	-----------------------------------

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.	TSDF Signature 	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Rejected	Date Received 4 6 82
---	---	---	--------------------------------

Describe any significant discrepancies between manifest and shipment.	Facility Site EPA I.D. Number IND016360265	Was a Surcharge Assessed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	--	---

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4708 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

TSDF COPY

To 210 RT-50 GRM 4.6.82

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste☐ Other

MI 0184814

IDENTIFICATION	Generator's Name Bofors Lakeway, Inc.	Primary Transporter's Name Chemical Waste Management, Inc.	Treatment, Storage or Disposal Facility American Chemical Services
	Site Address 5025 Evanston Avenue Muskegon, MI 49443	Transporters Address P.O. Box 1296 Calumet City, IL 60409	Facility Address Griffith, IN 46319
	Phone Number (616) 788-2341	Phone Number (312) 568-3400	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MI 0006030373	Transporter's EPA I.D. Number IL T000806604	Facility Site EPA I.D. Number IN D016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

M I D 0 0 6 0 3 0 3 7 3

I L T 0 0 0 8 0 6 6 0 4

GENERATOR COMPLETES

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Gas	Sudge			
1.	Waste Toluene Solu. Flammable liquid	Flammable	UN1294	07			X				150.00	Gal.	F005
2.													
3.													
4.													
5.													
6.													

COMMENTS	Include Safety precautions and special handling instructions.
	Wear rubber gloves, boots, and eye protection

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.	Generator Signature ① <i>CBH</i>	Date Shipped MO. DAY YEAR 04/1/82
--	-------------------------------------	---

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.	Transporter Vehicle I.D. No. No. 1 423	Transporter Signature ② <i>D. Lewis</i>	Date(s) Received 4/1/82
	Subsequent Transporter Vehicle I.D. No's	Subsequent transporter(s) signature(s) ③	

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.	TSDF Signature ④ <i>[Signature]</i>	Facility Site EPA I.D. Number IND 016360265	Accepted <input checked="" type="checkbox"/> Rejected <input type="checkbox"/>	Date Received 4/1/82
--	--	--	--	-------------------------

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed?

☐ Yes
☒ No

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

TSDF COPY TO 211 RT-50 GRW 4/14/82

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste☐ Other

MI 0184815

IDENTIFICATION	Generator's Name Bofors Lakeway, Inc.	Primary Transporter's Name Chemical Waste Management, Inc.	Treatment, Storage or Disposal Facility American Chemical Services
	Site Address 5025 Evanston Avenue Muskegon, MI 49443	Transporter's Address P.O. Box 1296 Calumet City, IL 60409	Facility Address Griffith, IN 46319
	Phone Number (616) 788-2341	Phone Number (312) 568-3400	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number XXXXXXXXXXXXXXX	Transporter's EPA I.D. Number XXXXXXXXXXXXXXX	Facility Site EPA I.D. Number IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

M I D 0 0 6 0 3 0 3 7 3

I L T 0 0 0 8 0 6 6 0 4

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Gas	Sludge			
1.	Waste Toluene Solu. Flammable liquid	Flammable	UN1294	07				X			150000	Gal.	F 0 0 5
2.													
3.													
4.													
5.													
6.													

Include Safety precautions and special handling instructions.

Wear rubber gloves, boots, and eye protection.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature

Date Shipped
MO DAY YEAR

① CB9 nent

042682

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1

Transporter Signature

Date(s) Received

② D. Lewis

42882

Subsequent Transporter Vehicle I.D. No's

Subsequent transporter(s) signature(s)

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature

☒ Accepted
☐ Rejected

Date Received

④ J. Dunfee

42882

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed?

☐ Yes
☐ No

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

TO 210 RT-50 GRM 4-28-82
TSDF COPY

002247

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste☐ Other

MI0184881

IDENTIFICATION	Generator's Name Bofors Lakeway, Inc.	Primary Transporter's Name Chemical Waste Management, Inc.	Treatment, Storage or Disposal Facility American Chemical Services
	Site Address 5025 Evanston Avenue Muskegon, MI 49443	Transporters Address 4300 W. 123rd St. P.O. Box 1296 Calumet City, IL 60409 Alsip, IL 60658	Facility Address 420 S. Colfax PO Box 190 Griffith, IN 46319
	Phone Number (616) 788-2341	Phone Number (312) 568-3400 396-1060	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MI D 0 0 6 0 3 0 3 7 3	Transporter's EPA I.D. Number IL D 0 0 0 8 0 6 6 0 4	Facility Site EPA I.D. Number IN D 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

MI D 0 0 6 0 3 0 3 7 3

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name)	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Gas	Sludge			
1.	Waste Toluene Solu. Flammable liquid	Flammable	UN1294	07							4500	Gal.	F 0 0 1 5
2.													
3.													
4.													
5.													
6.													

COMMENTS	Include Safety precautions and special handling instructions.
	Wear rubber gloves, boots, and eye protection

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.	Generator Signature ① <i>[Signature]</i>	Date Shipped MO. DAY YEAR 05 28 82
--	---	--

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.	Transporter Vehicle I.D. No. No. 1 423	Transporter Signature ② <i>[Signature]</i>	Date Received 05 28 82
	Subsequent Transporter Vehicle I.D. No's	Subsequent transporter(s) signature(s) ③	

If the shipment cannot be delivered, describe the reasons for non-delivery:

TSDF COMPLETES	TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.	TSDF Signature ④ <i>[Signature]</i>	Accepted <input checked="" type="checkbox"/> Rejected <input type="checkbox"/>	Date Received 5 28 82
	Describe any significant discrepancies between manifest and shipment.	Facility Site EPA I.D. Number IND 0 1 6 3 6 0 2 6 5		

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4708 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

T0210KT-SO 600M 5-28-82

TSDF COPY

002248

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS) ☐ Act 136 Waste ☐ Other

MI0184880

IDENTIFICATION	Generator's Name Bofors Lakeway, Inc.	Primary Transporter's Name Chemical Waste Management, Inc.	Treatment, Storage or Disposal Facility American Chemical Services
	Site Address 5025 Evanston Avenue Muskegon, MI 49443	Transporter's Address 4300 W. 123rd St. Alsip, IL 60658	Facility Address 420 S. Colfax, P.O. Box 190 Griffith, IN 46319
	Phone Number (616) 788-2341	Phone Number (312) 568-3400	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MI0006030373	Transporter's EPA I.D. Number 000806604	Facility Site EPA I.D. Number IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

MI0006030373

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name)	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form			Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Gas			
1.	Waste Toluene Solu. Flammable liquid	Flammable	UN1294	07	1	CT	X			4500	Gal.	F005
2.												
3.												
4.												
5.												
6.												

COMMENTS	Include Safety precautions and special handling instructions.
	Wear rubber gloves, boots, and eye protection

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature ① <i>M. Winkopp</i>	Date Shipped MO. DAY. YEAR 07.15.82
--	---

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1 423
Subsequent Transporter Vehicle I.D. No's

Transporter Signature ② <i>Richard A. Kennedy</i>	Date(s) Received 07.16.82
Subsequent transporter(s) signature(s) ③	

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature ④ <i>A. Danfee</i>	Accepted <input checked="" type="checkbox"/> Rejected <input type="checkbox"/>	Date Received 7.16.82
Facility Site EPA I.D. Number IND016360045		

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---------------------------	---

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

T0211RT-50.6PM 7.16.82 TSDF COPY

DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste☐ Other

MI 0184947

Generator's Name NOBEL, INC.		Primary Transporter's Name CHEMICAL WASTE MANAGEMENT, INC.		Treatment, Storage or Disposal Facility AMERICAN CHEMICAL SERVICES	
Site Address 5025 Evanston Ave. Muskegon, Michigan 49443		Transporter's Address 4300 W. 123rd. St. Alsip, IL 60658		Facility Address 420 S. Colfax, P.O. Box 190 Griffith, Ind. 46319	
Phone Number 616 788-2341		Phone Number (312) 396-1060		Phone Number (219) 924-4370	
Generator's Site EPA I.D. Number M I D 0 0 6 0 3 0 3 7 3		Transporter's EPA I.D. Number 0 0 0 8 0 6 6 0 4		Facility Site EPA I.D. Number I N D 0 1 6 3 6 0 2 6 5	

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Gas	Sludge			
1.	Waste Toluene Solution Flammable Liquid	Flammable	UN 1294	0,7	1	CT		X			5000	gal	005
2.													
3.													
4.													
5.													
6.													

Include Safety precautions and special handling instructions.

Wear rubber gloves, boots and eye protection

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature

Date Received
MO DAY YEAR

06-09-82

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No.

No. 1

423

Subsequent Transporter Vehicle I.D. No's

Transporter Signature

Date(s) Received

06-11-82

Subsequent transporter(s) signature(s)

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature

☒ Accepted
☐ Rejected

Date Received

6-11-82

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed?

☐ Yes
☐ No

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

TO 210 RT-506 PM 6-11-82

TSDF COPY

002250

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste☐ Other

MI 0184882

Generator's Name Bofors Lakeway, Inc.	Primary Transporter's Name Chemical Waste Management, Inc.	Treatment, Storage or Disposal Facility American Chemical Services
Site Address 5025 Evanston Avenue Muskegon, MI 49443	Transporter's Address 4300 W. 123rd St. Alsip, IL 60658	Facility Address 420 S. Colfax, P.O. Box 190 Griffith, IN 46319
Phone Number (616) 788-2341	Phone Number (312) 398-1060	Phone Number (219) 924-4370
Generator's Site EPA I.D. Number MI D 0 0 6 0 3 0 3 7 3	Transporter's EPA I.D. Number IL 1 1 0 0 0 8 0 6 6 0 4	Facility Site EPA I.D. Number IN D 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

MI D 0 0 6 0 3 0 3 7 3

GENERATOR COMPLETES

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class.	U.N./N.A. No.	Haz. Class Code	Container		Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Gas	Sludge			
1.	Waste Toluene Solu. Flammable liquid	Flammable	UN1294	07	1	CT	X				450.0	Gal.	F 0 0 5
2.													
3.													
4.													
5.													
6.													

COMMENTS	Include Safety precautions and special handling instructions. Wear rubber gloves, boots, and eye protection
----------	---

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.	Generator Signature <i>[Signature]</i>	Date MO. DAY. YEAR 07.22.82
--	---	--

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.	Transporter Vehicle I.D. No. No. 1 423	Transporter Signature <i>[Signature]</i>	Date(s) Received 07.23.82
	Subsequent Transporter Vehicle I.D. No's	Subsequent transporter(s) signature(s)	

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDf CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.	TSDf Signature <i>[Signature]</i>	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Rejected	Date Received 7.23.82
Describe any significant discrepancies between manifest and shipment.	Facility Site EPA I.D. Number IND 0 1 6 3 6 0 2 6 5	Was a Surcharge Assessed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

T0212RT-50 6PM TSDf COPY 7.23.82

002251

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste☐ Other

MI0195444

IDENTIFICATION	Generator's Name BOFORS NOBEL, INC.	Primary Transporter's Name CHEMICAL WASTE MANAGEMENT	Treatment, Storage or Disposal Facility CHEMICAL WASTE MANAGEMENT
	Site Address 5025 Evanston Avenue Muskegon, MI 49443	Transporter's Address 4300 W. 123rd St. Alsip, IL 60658	Facility Address 420 S. Colfax, PO Box 190 Griffith, IN 46319
	Phone Number 616 788-2341	Phone Number (312) 396-1060	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MI D 0 0 6 0 3 0 3 7 3	Transporter's EPA I.D. Number IL D 0 0 0 8 0 6 6 0 4	Facility Site EPA I.D. Number IN D 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES

WASTE INFORMATION	LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
						No.	Type	Solid	Liquid	Gas	Sludge			
	1.	Waste Toluene Solution Flammable Liquid	Flammable	UN 1294	07	1	CT		X			5000	gal	F 0 0 5
	2.													
	3.													
	4.													
	5.													
	6.													

Include Safety precautions and special handling instructions.

Wear rubber gloves, boots and eye protection.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature

Date Shipped
MO. DAY YEAR

① Howard Peckham 08/31/82

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No.

No. 1

423

Subsequent Transporter Vehicle I.D. No's

Transporter Signature

Date(s) Received

② Vern D. Ben 08/03/82

Subsequent transporter(s) signature(s)

③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature

④

Facility Site EPA I.D. Number

IND 0 1 6 3 6 0 2 6 5

☒ Accepted
☐ Rejected

Date Received

8/3/82

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed?

☐ Yes
☒ No

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

TSDF COPY

To 210 E 7-59 6R 11-8382

002252

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste☐ Other

MI 0231228

IDENTIFICATION	Generator's Name Bofors Nobel Inc.	Primary Transporter's Name Chemical Waste Management, Inc.	Treatment, Storage or Disposal Facility American Chemical Services
	Site Address 5025 Evanston Avenue Muskegon, MI 49443	Transporters Address 4300 W. 123rd St Alsip IL 60658	Facility Address 420 S. Colfax, P.O. Box 190 Griffith IN 46319
	Phone Number (616) 788-2341	Phone Number (312) 398-1060	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MI D 0 0 6 0 3 0 3 7 3	Transporter's EPA I.D. Number IL D 0 0 0 8 0 6 6 0 4	Facility Site EPA I.D. Number IN D 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES	LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
						No.	Type	Solid	Liquid	Gas	Sludge			
	1.	Waste Toluene Solu. Flammable liquid	Flammable	UN1294	07		CT		X			500 Gal.		0000
	2.													
	3.													
	4.													
	5.													
	6.													

Include Safety precautions and special handling instructions.

Wear rubber gloves, boots, and eye protection

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature

Date Shipped
MO. DAY YEAR① *[Signature]*

08/14/82

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. **No. 1 423**

Subsequent Transporter Vehicle I.D. No's

Transporter Signature

② *[Signature]*

Date(s) Received

08/17/82

③ Subsequent transporter(s) signature(s)

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature

④ *[Signature]*☒ Accepted☐ Rejected

Date Received

8/17/82

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed?

☐ Yes☒ No

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND 800-424-8802 24 HOURS PER DAY.

TO 2107 7-50 GPM 8/17/82 TSDF COPY

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste☐ Other

MI 0231227

IDENTIFICATION	Generator's Name Bofors Nobel Inc.	Primary Transporter's Name Chemical Waste Management, Inc.	Treatment, Storage or Disposal Facility American Chemical Services
	Site Address 5025 Evanston Avenue Muskegon, MI 49443	Transporters Address 4300 W. 123rd St Alsip IL 60658	Facility Address 420 S. Colfax, P.O. Box 190 Griffith IN 46319
	Phone Number (616) 788-2341	Phone Number (312) 398-1060	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number M I D 0 0 6 0 3 0 3 7 3	Transporter's EPA I.D. Number I L D 0 0 0 8 0 6 6 0 4	Facility Site EPA I.D. Number I N D 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES	LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form			Total Weight or Volume	Units	Hazardous or Liquid Waste Number
						No.	Type	Solid	Liquid	Gas			
WASTE INFORMATION	1.	Waste Toluene Solu. Flammable liquid	Flammable	UN1294	07	OT			X			4500 Gal.	F 0 0 5
	2.												
	3.												
	4.												
	5.												
	6.												

COMMENTS	Include Safety precautions and special handling instructions.
	Wear rubber gloves, boots, and eye protection

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.	Generator Signature <i>[Signature]</i>	Date Shipped MO. DAY YEAR 08/30/82
--	---	--

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.	Transporter Vehicle I.D. No. No. 1 684	Transporter Signature <i>[Signature]</i>	Date(s) Received 09/30/82
	Subsequent Transporter Vehicle I.D. No's	Subsequent transporter(s) signature(s)	

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.	TSDF Signature <i>[Signature]</i>	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Rejected	Date Received 8/30/82
	Facility Site EPA I.D. Number IND016360265		

Describe any significant discrepancies between manifest and shipment.	Was a Surcharge Assessed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	---

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

TSDF COPY TO 210 FT-506 PM 8:30:82

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste☐ Other

MI 0231226

IDENTIFICATION	Generator's Name Bofors Nobel Inc.	Primary Transporter's Name Chemical Waste Management, Inc.	Treatment, Storage or Disposal Facility American Chemical Services
	Site Address 5025 Evanston Avenue Muskegon, MI 49443	Transporter's Address 4300 W. 123rd St Alsip IL 60658	Facility Address 420 S. Colfax, P.O. Box 190 Griffith IN 46319
	Phone Number (616) 788-2341	Phone Number (312) 398-1060	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MI D006030373	Transporter's EPA I.D. Number IL D000806604	Facility Site EPA I.D. Number IN D016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES	LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
						No.	Type	Solid	Liquid	Gas	Sludge			
	1.	Waste Toluene Solu. Flammable liquid	Flammable	UN1294	07		CT		x			60.00	Gal.	F005
	2.													
	3.													
	4.													
	5.													
	6.													

Include Safety precautions and special handling instructions.

Wear rubber gloves, boots, and eye protection

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature

Date Shipped
MO. DAY YEAR① *M. S. Hopp*

09.02.82

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1

Transporter Signature

Date(s) Received

② *Charles H. Stra...*

9.13.82

Subsequent Transporter Vehicle I.D. No's

Subsequent transporter(s) signature(s)

③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature

☒ Accepted
☐ Rejected

Date Received

Facility Site EPA I.D. Number

IN D016360265

9.3.82

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed?

☐ Yes
☒ No

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

TSDF COPY

T0211.R T-50 GRM 9.3.82

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste☐ Other

MI 0231225

IDENTIFICATION	Generator's Name Bofors Nobel Inc.	Primary Transporter's Name Chemical Waste Management, Inc.	Treatment, Storage or Disposal Facility American Chemical Services
	Site Address 5025 Evanston Avenue Muskegon, MI 49443	Transporters Address 4300 W. 123rd St Alsip IL 60658	Facility Address 420 S. Colfax, P.O. Box 190 Griffith IN 46319
	Phone Number (616) 788-2341	Phone Number (312) 398-1060	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number M I D 0 0 6 0 3 0 3 7 3	Transporter's EPA I.D. Number I L D 0 0 0 8 0 6 6 0 4	Facility Site EPA I.D. Number I N D 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES	LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
						No.	Type	Solid	Liquid	Gas	Sludge			
	1.	Waste Toluene Solu. Flammable liquid	Flammable	UN1294	07		CT		X			5000 Gal.		F 0 0 5
	2.													
	3.													
	4.													
	5.													
	6.													

Include Safety precautions and special handling instructions.

Wear rubber gloves, boots, and eye protection

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature

① *Matt Kopp*Date Shipped
MO. DAY YEAR

09/16/82

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No.

No. 1

684

Subsequent Transporter Vehicle I.D. No's

Transporter Signature

② *Chris DeRosa*

Subsequent transporter(s) signature(s)

③

Date(s) Received

09/16/82

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature

④ *J. Dimpfel*

Facility Site EPA I.D. Number

IN 001 631 602 605

☒ Accepted
☐ Rejected

Date Received

9/16/82

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed?

☐ Yes
☒ No

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

To 211 RT-50 GRM 9-16-82

TSDF COPY

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste☐ Other

MI 0231224

IDENTIFICATION	Generator's Name Bofors Nobel Inc.	Primary Transporter's Name Chemical Waste Management, Inc.	Treatment, Storage or Disposal Facility American Chemical Services
	Site Address 5025 Evanston Avenue Muskegon, MI 49443	Transporters Address 4300 W. 123rd St Alsip IL 60658	Facility Address 420 S. Colfax, P.O. Box 190 Griffith IN 46319
	Phone Number (616) 788-2341	Phone Number (312) 398-1060	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number M I D 0 0 6 0 3 0 3 7 3	Transporter's EPA I.D. Number I L D 0 0 0 8 0 6 6 0 4	Facility Site EPA I.D. Number I N D 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES	LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
						No.	Type	Solid	Liquid	Gas	Sludge			
	1.	Waste Toluene Solu. Flammable liquid	Flammable	UN1294	07		OT		x			5000	Gal.	F 0 0 5
	2.													
	3.													
	4.													
	5.													
	6.													

Include Safety precautions and special handling instructions.

Wear rubber gloves, boots, and eye protection.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature

Date Shipped
MO. DAY YEAR① *CRPent*

092782

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1 684

Transporter Signature

Date(s) Received

② *P. Lewis*

92982

Subsequent Transporter Vehicle I.D. No's

Subsequent transporter(s) signature(s)

③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature

☒ Accepted
☐ Rejected

Date Received

Facility Site EPA I.D. Number

Was a Surcharge Assessed?

☐ Yes
☐ No

Describe any significant discrepancies between manifest and shipment.

92982

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

TSDF COPY To 211KT-50 6/11 9-29-82

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste☐ Other

MI 0231223

IDENTIFICATION	Generator's Name Bofors Nobel Inc.	Primary Transporter's Name Chemical Waste Management, Inc.	Treatment, Storage or Disposal Facility American Chemical Services
	Site Address 5025 Evanston Avenue Muskegon, MI 49443	Transporters Address 4300 W. 123rd St Alsip IL 60658	Facility Address 420 S. Colfax, P.O. Box 190 Griffith IN 46319
	Phone Number (616) 788-2341	Phone Number (312) 398-1060	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MI D 0 0 6 0 3 0 3 7 3	Transporter's EPA I.D. Number IL D 0 0 0 8 0 6 6 0 4	Facility Site EPA I.D. Number IN D 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES	LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
						No.	Type	Solid	Liquid	Gas	Sludge			
	1.	Waste Toluene Solu. Flammable liquid	Flammable	UN1294	07		CT		X			4,500	Gal.	F 0 0 5
	2.													
	3.													
	4.													
	5.													
	6.													

Include Safety precautions and special handling instructions.

Wear rubber gloves, boots, and eye protection

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature

Date Shipped
MO. DAY YEAR

①

M. W. Kopp

10/12/82

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No.

No. 1

684

Subsequent Transporter Vehicle I.D. No's

Transporter Signature

Date(s) Received

②

Jay A. Stot

10/12/82

③

Subsequent transporter(s) signature(s)

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature

④

J. Dunfee

Facility Site EPA I.D. Number

IND 01163160265

☒ Accepted
☐ Rejected

Date Received

10/12/82

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed?

☐ Yes
☒ No

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4708 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

TO 211KT-50 GRM 10-12-82 TSDF COPY

002258

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste☐ Other

MI 0166994

IDENTIFICATION	Generator's Name Bofors Nobel Inc.	Primary Transporter's Name Chemical Waste Management, Inc.	Treatment, Storage or Disposal Facility American Chemical Services
	Site Address 5025 Evanston Avenue Muskegon, MI 49443	Transporter's Address 4300 W. 123rd St Alsip IL 60658	Facility Address 420 S. Colfax, P.O. Box 190 Griffith IN 46319
	Phone Number (616) 788-2341	Phone Number (312) 398-1060	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MI D 006030373	Transporter's EPA I.D. Number IL D 000806604	Facility Site EPA I.D. Number IN D 016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Gas	Sludge			
1.	Waste Toluene Solu. Flammable liquid	Flammable	UN1294	02	1	CT	X				4500	Gal.	F 005
2.													
3.													
4.													
5.													
6.													

Include Safety precautions and special handling instructions.

Wear rubber gloves, boots, and eye protection

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature

① *M. H. H. H.*Date Shipped
MO DAY YEAR

10 26 82

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No.

No. 1

684

Subsequent Transporter Vehicle I.D. No's

Transporter Signature

② *Gay A. H.*

Date(s) Received

10 26 82

Subsequent transporter(s) signature(s)

③

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature

④ *Thompson*☒ Accepted☐ Rejected

Date Received

10 26 82

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed?

☐ Yes☒ No

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

TO 212KT-SO GRM 10-26-82

TSDF COPY

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste☐ Other

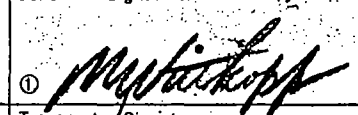
MI0166995

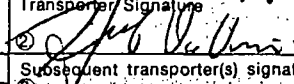
IDENTIFICATION	Generator's Name Bofors Nobel Inc.	Primary Transporter's Name Chemical Waste Management, Inc.	Treatment, Storage or Disposal Facility American Chemical Services
	Site Address 5025 Evanston Avenue Muskegon, MI 49443	Transporters Address 4300 W. 123rd St Alsip IL 60658	Facility Address 420 S. Colfax, P.O. Box 190 Griffith IN 46319
	Phone Number (616) 788-2341	Phone Number (312) 398-1060	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MI D 0 0 6 0 3 0 3 7 3	Transporter's EPA I.D. Number IL D 0 0 0 8 0 6 6 0 4	Facility Site EPA I.D. Number IN D 0 1 6 3 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

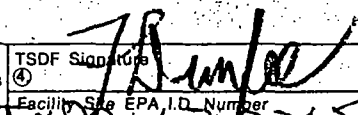
LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form			Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Sludge			
1.	Waste Toluene Solu. Flammable liquid	Flammable	UN1294	0 2	1	CT	X			4500	Gal.	F 0 0 5
2.												
3.												
4.												
5.												
6.												

COMMENTS	Include Safety precautions and special handling instructions.
	Wear rubber gloves, boots, and eye protection

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.	Generator Signature  ①	Date Shipped MO. DAY YEAR 11/11/82
---	---	--

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.	Transporter Vehicle I.D. No. No. 1 684 Subsequent Transporter Vehicle I.D. No's	Transporter Signature  ② Subsequent transporter(s) signature(s) ③	Date(s) Received 11/11/82
--	---	--	------------------------------

If the shipment cannot be delivered, describe the reasons for non-delivery.

RECEIVER CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I further certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this manifest is the original as indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.	TSDF Signature  ④ Facility Site EPA I.D. Number IND 0 1 6 3 6 0 2 6 5	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Rejected	Date Received 11/11/82
Were there any discrepancies between manifest and shipment?		Was a Surcharge Assessed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT

T-21027-50644
TSDF COPY 11/11/82

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste☐ Other

MI0195445

IDENTIFICATION	Generator's Name BOFORS NOBEL, INC.	Primary Transporter's Name CHEMICAL WASTE MANAGEMENT	Treatment, Storage or Disposal Facility CHEMICAL WASTE MANAGEMENT AMERICAN/Chambers
	Site Address 5025 Evanston Avenue Muskegon, MI 49443	Transporters Address 4300 W. 123rd St. Alsip, IL 60658	Facility Address 420 S. Colfax, PO Box 190 Griffith, IN 46319
	Phone Number (616) 788-2341	Phone Number (312) 396-1060	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MI D 0 0 6 0 3 0 3 7 3	Transporter's EPA I.D. Number IL D 0 0 0 8 0 6 6 0 4	Facility Site EPA I.D. Number IN D 0 1 6 3 6 6 0 2 6 5

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form			Total Weight or Volume	Units	Hazardous or Liquid Waste Number	
					No.	Type	Solid	Liquid	Gas				Sludge
1.	Waste Toluene Solution Flammable Liquid	Flammable	UN 1294	07	1	CT		X			5000	gal	F 0 0 5
2.													
3.													
4.													
5.													
6.													

COMMENTS	Include Safety precautions and special handling instructions.
	Wear rubber gloves, boots and eye protection.

TRANSPORTER COMPLETES	GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.		Generator Signature W. H. Kopp	Date Shipped MO. DAY YEAR 11 23 82
	HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.		Transporter Signature Alf. Muzena	Date(s) Received 11 23 82
	Transporter Vehicle I.D. No. No. 1 684 Subsequent Transporter Vehicle I.D. No's	Subsequent transporter(s) signature(s)		

If the shipment cannot be delivered, describe the reasons for non-delivery.		TSD Signature F. Bunker Facility Site EPA I.D. Number MI D 0 1 6 3 6 6 0 2 6 5	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Rejected	Date Received 11 23 82
RECEIPT: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes and that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this manifest is indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.				
Discrepancies between manifest and shipment.		Was a Surcharge Assessed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-6746

11-23-82

TSD COPY

HAZARDOUS WASTE MANIFEST

B/L#27637

MANIFEST DOCUMENT NUMBER

IND005464706

SHIPPER NUMBER

XXX IND005464706

CARRIER NUMBER

Bomarko Truck

NAME OF CARRIER

(SCAC)

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND005464706	Bomarko Inc. North Oak Rd., Plymouth, IN. 46563	2/9/82
TRANSPORTER # 1	IND005464706	Bomarko, Inc. North Oak Rd., Plymouth, IN. 46563	2/9/82
TRANSPORTER # 2 (if required)	IND01636026	American Chemicals, Griffith, Indiana	2/9/82
TSDF TREATMENT STORAGE OR DIS- POSAL FACILITY			
TSDF TREATMENT STORAGE OR DIS- POSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
Drums 25			Methanol/N-Propyl Acetate 1250							

SPECIAL HANDLING INSTRUCTIONS

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes ☐ No ☐REMIT
C.O.D. TO:
ADDRESS

COD

Amt: \$

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ \$TOTAL
CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID
except when box at
right is checked ☐ Check box if charges
are to be
collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding
\$ _____ per _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

(Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE

DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal

TSDF SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

B/L #27972

MANIFEST DOCUMENT NUMBER

IND005464706

SHIPPER NUMBER

IND005464706

CARRIER NUMBER

Bomarko Truck

NAME OF CARRIER

(SCAC)

IDENTIFICATION

1	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND005464706	Bomarko, Inc North Oak Rd., Plymouth, IN. 46563	3/23/82 X3/23/82X
TRANSPORTER #1	IND005464706	Bomarko Inc North Oak Rd., Plymouth, IN. 46563	3/23/82 X3/23/82X
TRANSPORTER #2 (If required)	IND00636026	American Chemicals, Griffith Indiana	3/23/82 X3/23/82X
TSDT TREATMENT STORAGE OR DIS- POSAL FACILITY			
TSDT TREATMENT STORAGE OR DIS- POSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
27 DRUMS			Methanol/N-Propyl Acetate 1350							

SPECIAL HANDLING INSTRUCTIONS

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes ☐ No ☐REMIT
C.O.D. TO:
ADDRESS

COD

Amt: \$

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ \$TOTAL
CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID ☐ Check box if charges
except when box at are to be
right is checked collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding:

\$ _____ per _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

(Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (If required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDT SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

B/L#28210

MANIFEST DOCUMENT NUMBER

IND005464706

SHIPPER NUMBER

IND005464706

Bomarko Truck

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND005464706	Bomarko, Inc. North Oak Rd., Plymouth IN. 46563	4/22/82
TRANSPORTER # 1	IND005464706	Bomarko, Inc. North Oak Rd., Plymouth, IN. 46563	4/22/82
TRANSPORTER # 2 (If required)	IND001636026	American Chemicals, Griffith Indiana	4/22/82
TSDF TREATMENT STORAGE OR DIS- POSAL FACILITY			
TSDF TREATMENT STORAGE OR DIS- POSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
31 drums			Methanol/N-Propyl Acetate 1550							

SPECIAL HANDLING INSTRUCTIONS

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

PLACARDS TENDERED

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

Yes ☐ No ☐REMIT
C.O.D. TO:
ADDRESS

COD

Amt: \$

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ \$TOTAL
CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID
except when box at
right is checked ☐ Check box if charges
are to be
collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding
\$ _____ per _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Signature

(Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDF SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

B/L #28482

MANIFEST DOCUMENT NUMBER

IND005464706

SHIPPER NUMBER

IND005464706

CARRIER NUMBER

Bomarko Truck

NAME OF CARRIER

(SCAC)

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND005464706	Bomarko, Inc North Oak Rd., Plymouth, IN. 46563	5/21/82
TRANSPORTER # 1	IND005464706	Bomarko, Inc. North Oak Rd., Plymouth, IN. 46563	5/21/82
TRANSPORTER # 2 (If required)	IND001636026	American Chemicals, Griffith Indiana	5/21/82
TSDF TREATMENT STORAGE OR DIS- POSAL FACILITY			
TSDF TREATMENT STORAGE OR DIS- POSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
22 drums			Methanol/N-Propyl Acetate 1100							

SPECIAL HANDLING INSTRUCTIONS

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

PLACARDS TENDERED

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

Yes ☐ No ☐REMIT
C.O.D. TO:
ADDRESS

COD

Amt: \$

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding
\$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

(Signature of Consignor)

TOTAL
CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID
except when box at
right is checked ☐ Check box if charges
are to be
collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (If required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDF SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

B/L#28715

MANIFEST DOCUMENT NUMBER

IND005464706

SHIPPER NUMBER

IND005464706

Bomarko Truck

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND005464706	Bomarko, Inc. North Oak Rd., Plymouth, IN. 46563	6/17/82
TRANSPORTER # 1	IND005464706	Bomarko, Inc. North Oak Rd., Plymouth, IN. 46563	6/17/82
TRANSPORTER # 2 (If required)	IND001636026	American Chemicals, Griffith Indiana	6/17/82
TSDF TREATMENT STORAGE OR DIS- POSAL FACILITY			
TSDF TREATMENT STORAGE OR DIS- POSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
26 25 DRUMS			Methanol/N-Propyl Acetate 1300							

SPECIAL HANDLING INSTRUCTIONS

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes ☐ No ☐REMIT
C.O.D. TO:
ADDRESS

COD

Amt: \$

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ \$TOTAL
CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID
except when box at
right is checked ☐ Check box if charges
are to be
collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.

\$ _____ per _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Signature _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor) _____

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (If required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDF SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

B/T #20042
MANIFEST DOCUMENT NUMBERIND005464706
SHIPPER NUMBERIND005464706
CARRIER NUMBERBomarko Truck
NAME OF CARRIER

(SCAC)

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND005464706	Bomarko, Inc. North Oak Rd., Plymouth, In 46563	7/29/82
TRANSPORTER # 1	IND005464706	Bomarko, Inc. North Oak Rd., Plymouth, IN 46563	7/29/82
TRANSPORTER # 2 (if required)	IND001636026	American Chemicals, Griffith Indiana	7/29/82
TSDT TREATMENT STORAGE OR DIS- POSAL FACILITY			
TSDT TREATMENT STORAGE OR DIS- POSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
22 DRUMS			Methanol/N-Propyl Acetate							

SPECIAL HANDLING INSTRUCTIONS

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes ☐ No ☐REMIT
C.O.D. TO:
ADDRESS

COD

Amt: \$

C.O.D. FEE:
PREPAID ☐
COLLECT ☐TOTAL
CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID
except when box at
right is checked ☐ Check box if charges
are to be
collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding:

\$ per

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier, of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE

DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDT SIGNATURE

DATE

5

HAZARDOUS WASTE MANIFEST

B/L#29270

MANIFEST DOCUMENT NUMBER

IND005464706

SHIPPER NUMBER

IND005464706

CARRIER NUMBER

Bomarko Truck

NAME OF CARRIER

(SCAC)

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND005464706	Bomarko, Inc. North Oak Rd., Plymouth, In. 46563	8/26/82
TRANSPORTER # 1	IND005464706	Bomarko, Inc. North Oak Rd., Plymouth, In. 46563	8/26/82
TRANSPORTER # 2 (if required)	IND001636026	American Chemicals, Griffith Indiana	8/26/82
TSDF TREATMENT STORAGE OR DIS- POSAL FACILITY			
TSDF TREATMENT STORAGE OR DIS- POSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
11 Drums		F005	Methanol/N-Propyl Acetate	NA COMB			50 GAL	550 GALS		

SPECIAL HANDLING INSTRUCTIONS

If an RO commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes ☐ No ☐REMIT
C.O.D. TO:
ADDRESS

COD

Amt: \$

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ \$TOTAL
CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID ☐ Check box if charges
except when box at are to be
right is checked collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding:

\$ _____ per _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDF SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

B/L #29562

MANIFEST DOCUMENT NUMBER

IND005464706

SHIPPER NUMBER

IND005464706

Bomarko Truck

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND005464706	Bomarko, Inc. North Oak Road, Plymouth, IN 46563	9/30/82
TRANSPORTER # 1	IND005464706	Bomarko, Inc. North Oak Road, Plymouth, IN 46563	9/30/82
TRANSPORTER # 2 (If required)	IND001636026	American Chemicals, Griffith IN	9/30/82
TSDf TREATMENT STORAGE OR DIS- POSAL FACILITY			
TSDf TREATMENT STORAGE OR DIS- POSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
31 DRUMS		FO05	Methanol/n-Propyl Acetate	NA Comb.			50 Gal.	1550 GAL.		

SPECIAL HANDLING INSTRUCTIONS

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes ☐ No ☐REMIT
C.O.D. TO:
ADDRESS

COD

Amt: \$

C.O.D. FEE
PREPAID ☐
COLLECT ☐ \$TOTAL
CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID
except when box at
right is checked ☐ Check box if charges
are to be
collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding:

\$ _____ per _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier, off or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE

DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (If required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDf SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

B/L#29864

MANIFEST DOCUMENT NUMBER

IND005464706

SHIPPER NUMBER

IND005464706

CARRIER NUMBER

Bomarko Truck

NAME OF CARRIER

(SCAC)

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND005464706	Bomarko, Inc. North Oak Rd., Plymouth, Indiana 46563	10/29/82
TRANSPORTER # 1	IND005464706	Bomarko, Inc. North Oak Rd. Plymouth, Indiana 46563	10/29/82
TRANSPORTER # 2 (If required)	IND001636026	American Chemicals, Griffith, IN.	10/29/82
TSDF TREATMENT STORAGE OR DIS- POSAL FACILITY			
TSDF TREATMENT STORAGE OR DIS- POSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
17 DRUMS		F005	Methanol/N-Propyl Acetate	NA COMB.			50 GAL	850 GAL		

SPECIAL HANDLING INSTRUCTIONS

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes ☐ No ☐REMIT
C.O.D. TO:
ADDRESS

COD

Amt: \$

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ \$TOTAL
CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID
except when box at
right is checked ☐ Check box if charges
are to be
collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

\$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Signature _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

(Signature of Consignor) _____

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE _____

DATE _____

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE _____

TRANSPORTER #2 SIGNATURE & DATE (if required) _____

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE _____

DATE _____

5

HAZARDOUS WASTE MANIFEST

B/L#130139

MANIFEST DOCUMENT NUMBER

IND005464706

SHIPPER NUMBER

IND005464706

CARRIER NUMBER

Bonarko Truck

NAME OF CARRIER

(SCAC)

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND005464706	Bonarko, Inc. North Oak Road, Plymouth, Indiana 46563	11/30/82
TRANSPORTER # 1	IND005464706	Bonarko, Inc. North Oak Road, Plymouth, Indiana 46563	11/30/82
TRANSPORTER # 2 (If required)	IND001636026	American Chemicals, Griffith, Indiana	11/30/82
TSDf TREATMENT STORAGE OR DIS- POSAL FACILITY			
TSDf TREATMENT STORAGE OR DIS- POSAL FACILITY		ALTERNATE	

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
13 19 DRUMS		F005	Methanol/N-Propyl Acetate	NA COMB.			55 GAL	1045 GAL.		

SPECIAL HANDLING INSTRUCTIONS

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes ☐ No ☐REMIT
C.O.D. TO:
ADDRESS

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding:

\$ _____ per _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Signature _____

COD

Amt: \$ _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor) _____

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ \$ _____TOTAL
CHARGES: \$ _____

FREIGHT CHARGES

FREIGHT PREPAID ☐ Check box if charges
except when box is are to be
right is checked collect

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (If required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDf SIGNATURE

DATE

5

HAZARDOUS WASTE MANIFEST

B/I#130278

MANIFEST DOCUMENT NUMBER

INDCO 5464706

SHIPPER NUMBER

INDCO 5464706

CARRIER NUMBER

BOMARKO TRUCK

NAME OF CARRIER

(SCAC)

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND005464706	Bomarko, Inc. North Oak Road, Plymouth, IN 46563	12/16/82
TRANSPORTER # 1	IND005464706	Bomarko, Inc. North Oak Road, Plymouth, IN 46563	12/16/82
TRANSPORTER # 2 (If required)	IND001636026	American Chemicals, Griffith, INDIANA	12/16/82
TSDF TREATMENT STORAGE OR DIS- POSAL FACILITY			
TSDF TREATMENT STORAGE OR DIS- POSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
24 Drums		FO05	Methanol/N-Propyl Acetate	HA Comb			55 Gal.	1320 1263 Gal.		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrac 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes ☐ No ☐

REMIT
C.O.D. TO:
ADDRESS

COD

Amt: \$

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ \$

TOTAL
CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID
except when box at
right is checked ☐ Check box if charges
are to be
collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding:

\$ _____ per _____

* If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

(Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

GENERATOR'S SIGNATURE

DATE

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

TSDF SIGNATURE

DATE

WASTE DISPOSAL MANIFEST

☐ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste (OTHER)

MI 0085089

IDENTIFICATION	Generator's Name <u>Bradford White Corp</u>	Primary Transporter's Name <u>Rozema Ind. Waste</u>	Treatment, Storage or Disposal Facility <u>American Chemical Service</u>
	Site Address <u>200 Lafayette St.</u>	Transporters Address <u>2900 Peach Ridge N.W.</u>	Facility Address <u>420 Colfax Ave.</u>
	<u>Middleville Mi 49333</u>	<u>WALKER Mich.</u>	<u>GRIFFITH Ind. 46319</u>
	Phone Number <u>616 795-3324</u>	Phone Number <u>616 453-3600</u>	Phone Number <u>219 924-4370</u>
	Generator's Site EPA I.D. Number <u>MI D043678391</u>	Transporter's EPA I.D. Number <u>MI D000647032</u>	Facility Site EPA I.D. Number <u>IND016340265</u>

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Weight or Volume	Units	Hazardous Waste Number
					No.	Type	Solid	Liquid	Gas	Sludge			
1.	Waste Trichloroethylene & Thinners	Combustible	1993	01	T	RR	X				2000 gal	F001	
2.											2500		
3.													
4.													
5.													
6.													

COMMENTS	Include Safety precautions and special handling instructions.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.	Generator Signature <u>Wayne Johnson</u>	Date Shipped MO. DAY YEAR <u>5 18 82</u>
---	---	--

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.	Transporter Vehicle I.D. No. <u>No. 1</u>	Transporter Signature <u>Beth R</u>	Date(s) Received <u>5/18/82</u>
	Subsequent Transporter Vehicle I.D. No's	Subsequent transporter(s) signature(s)	

If the shipment cannot be delivered, describe the reasons for non-delivery:

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.	TSDF Signature <u>W. Johnson</u>	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Rejected	Date Received <u>05/18/82</u>
	Facility Site EPA I.D. Number <u>IND016340265</u>		

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800-294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800-424-8802

TO 203 T-SO 6RM 5/18/82

TSDF COPY

002273

WASTE DISPOSAL MANIFEST

☐ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste☐ Other

MI 0225821

IDENTIFICATION	Generator's Name Bradford White Corp	Primary Transporter's Name Rozema Ind Waste	Treatment, Storage or Disposal Facility American Chemical Serv.
	Site Address 200 Lafayette Middleville MI 49333	Transporter's Address 2900 Peach Ridge NW Walker MI	Facility Address 420 Colfax Ave. Griffith Ind. 46319
	Phone Number (616) 795-3364	Phone Number (616) 453-3600	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MI D043678391	Transporter's EPA I.D. Number MI D000647032	Facility Site EPA I.D. Number IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES

LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
					No.	Type	Solid	Liquid	Gas	Sludge			
1.	Waste Trichlor, Thinners & oils	Combustible	1993	011	T	Tr		X			210.00	92	Fl 0101
2.													
3.													
4.													
5.													
6.													

COMMENTS	Include Safety precautions and special handling instructions.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature

Date Shipped
MO. DAY YEAR

① Lawrence Stanley

060882

Transporter Signature

Date(s) Received

② Butel R

060882

③ Subsequent transporter(s) signature(s)

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. **No. 1**
Subsequent Transporter Vehicle I.D. No's

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature

④

Facility Site EPA I.D. Number

IND016360265

☐ Accepted
☐ Rejected

Date Received

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed?

☐ Yes
☐ No

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4708 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

TSDF COPY To 211 RT-50 6PM 6-8-82

002274

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste (OTHER)

MI 0003113

IDENTIFICATION	Generator's Name Bradford White Corp.	Primary Transporter's Name Valley City Refuse Disposal, Inc.	Treatment, Storage or Disposal Facility American Chemical Service, Inc.
	Site Address 200 Lafayette Middleville, MI 49333	Transporters Address 2650 Thornwood, SW Wyoming, MI 49509	Facility Address 420 S. Colfax Griffith, IN 41319
	Phone Number (616) 795-3364	Phone Number (616) 538-8499	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MID 043 678 391	Transporter's EPA I.D. Number MID 055 855 373	Facility Site EPA I.D. Number IND 016 360 265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Weight or Volume	Units	Hazardous Waste Number
					No.	Type	Solid	Liquid	Gas	Sludge			
1.	(Waste Trichlor, Thinners & Oils)	Combustible	1993	01	1	CT		X			2500	gal	F001
2.													
3.													
4.													
5.													
6.													

Include Safety precautions and special handling instructions.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature

① *Wayne J. [Signature]*Date Shipped
MO. DAY, YEAR

1/22/82

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. No. 1 637

Subsequent Transporter Vehicle I.D. No's

Transporter Signature

② *Bulet [Signature]*

Subsequent transporter(s) signature(s)

③

Date(s) Received

1/22/82

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature

④ *J. [Signature]*

Facility Site EPA I.D. Number

IND 016 360 265

☒ Accepted
☐ Rejected

Date Received

10/20/82

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800-294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800-424-8802

TSDF COPY TO 210 F T-50 GRM 10.20.82

HAZARDOUS WASTE MANIFEST

ORIGINAL - NOT NEGOTIABLE

002

MANIFEST DOCUMENT NUMBER

American Chemical Service

NAME OF CARRIER

(SCAC)

SHIPPER NUMBER

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND057396608	Capitol Products Corp., P.O. Box 146, Kentland, IN 47951 (219) 474-5136	17/MAR/82
TRANSPORTER # 1	IND016360265	American Chemical Service, 420 S. Colfax, Griffith, IN (219) 924-4370	17/MAR/82
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DIS- POSAL FACILITY	IND016360265	American Chemical Service, 420 S. Colfax, Griffith, IN (219) 924-4370	
TSDF TREATMENT STORAGE OR DIS- POSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	HM	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carriage Use Only)
41 Drums	RQ	P003	Flammable Liquid N.O.S.	1993			55 gal	2255		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

PLACARDS TENDERED

Yes ☒ No ☐

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

REMIT
C.O.D. TO:
ADDRESS

COD

Amt: \$

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ \$

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding:

\$ _____ per _____

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Signature _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

TOTAL
CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID
except when box at
right is checked ☐ Check box if charges
are to be
correct

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency.

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDF SIGNATURE

DATE

HAZARDOUS WASTE MANIFEST

ORIGINAL - NOT NEGOTIABLE

001

MANIFEST DOCUMENT NUMBER

Strand Trucking

SHIPPER NUMBER

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	IND057396608	219-474-5136 Capitol Products Corp. PO BOX 146 Kentland, IN 13465 Kenton St	4/951 03/04/80
TRANSPORTER # 1	ILT000646810	Strand Trucking Crestwood, IL 312-385-8440	03/04/80
TRANSPORTER # 2 (if required)			
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY	IND016360265	420 S. Colfax American Chemical Service Griffith, IN 219-924-4370	3/4/81
TSDf TREATMENT STORAGE OR DISPOSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WTNOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
11 drums	HM	Flammable Liquid N.O.S. 1993					605		

SPECIAL HANDLING INSTRUCTIONS

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes ☐ No ☐REMIT
C.O.D. TO:
ADDRESS

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding:

\$ _____ per _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Signature _____

COD

Amt: \$ _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

(Signature of Consignor) _____

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ \$ _____TOTAL
CHARGES: \$ _____

FREIGHT CHARGES

FREIGHT PREPAID ☐ Check box if charges are to be collect
except when box is right is checked ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE _____ TRANSPORTER #2 SIGNATURE & DATE (if required) _____

This is to certify acceptance of the hazardous waste for treatment, storage or disposal:

GENERATOR'S SIGNATURE _____

DATE _____

TSDf SIGNATURE _____

DATE _____

TRAILER SPOTTED 3/4/81

Pumped TO 1232

3/10/81

T-63

Jim Murphy

COMPLETED BY
GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0412626

Authorization Number 9 9 7 1 4 5
8 13

CELLU-CRAFT, INC.
(Company Name)

250 S. HICKS ROAD
Address

3 5 9 - 5 0 0 0
Phone Number

0 3 1 2 3 4 0 0 0 4
Generator Number 24

PALATINE
City

ILLINOIS 60067
State Zip

I L D 0 9 5 2 5 6 5 2 5
EPA Number

WASTE HAULER(S)

AMERICAN CHEMICAL
Hauler Name

420 S. COLFAX
Hauler Address

S.W.H. Registration Number 0 0 2 4 0 0 2
25 31

STRAND TRUCKING
Hauler Name

CRESTWOOD, IL.
Hauler Address

Phone Number

EPA Number
S.W.H. Registration Number I L T 0 0 0 6 4 6 8 1 0
32 38

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE
(Facility Name)

420 S. COLFAX AVE.
Address

918 0 8 9 0 2
Site Number 46

GRIFFITH
City

IND. 46319
State Zip

Phone Number

EPA Number
I N D 0 1 6 3 6 0 1 6 5

Alternate (Facility Name)

Address

Site Number 46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: INK SOLVENT

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

HAZARDOUS

FLAMMABLE

UN or NA Number 1 9 9 3

EPA HW Number

WEIGHT FOR
D.O.T. USE

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 4 2 3 5

1 0 8 9 0 2
GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS 77)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 3-19-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) L. L. Lull
(Authorized Signature)

DATE: 3/19/82
54 59

(2) _____
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael O. Buge
(Authorized Signature)

DATE: 3/19/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

On dock 3/19/82
To 1207E T-63 GRM 3/23/82

002278

COMPLETED BY
GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0623267

Authorization Number 997145

CELLUL-CRAFT (Company Name) 250 S Hicks Road Address 359-5000 Phone Number 0312340604 Generator Number 24
Palatine City Illinois 60067 Zip ILD095256525 EPA Number

WASTE HAULER(S)

AMERICAN CHEMICAL Hauler Name 420 S Colfax Hauler Address 312-768-3400 Phone Number S.W.H. Registration Number 0024001
IND016360265 EPA Number

Strand Trucking Hauler Name Crestwood, Ill Hauler Address 312-385-8440 Phone Number S.W.H. Registration Number XXXXXXXXXX
LLI000646810 EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) 420 S Colfax Ave Address 91808902 Site Number 46
Griffith City Indiana 46319 Zip 312763400 Phone Number IND016360265 EPA Number

Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: INK SOLVENT WASTE PHASE: LIQUID
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

HAZARDOUS

FLAMMABLE

UN or NA Number 1993

EPA HW Number F003

WEIGHT FOR D.O.T. USE 35,100 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 004290 1 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS 78) Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 6-30-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 6/30/82

(2) (Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 6/30/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2625

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

On dock 6-30-82 GRM TO 112 KT-63
602279-82

COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0389553

SPECIAL WASTE HAULING MANIFEST

Authorization Number

CELLU-CRAFT, INC. 250 S. HICKS RD. #359-5000
(Company Name) Address

PALATINE, ILLINOIS 60067
City State Zip

0312340004
Generator Number
ILD #095256525

AMERICAN CHEMICAL 420 S. COLFAX
Hauler Name Hauler Address

S.W.H. Registration Number

ILT #000646810

STRAND TRUCKING CRESTWOOD, ILLINOIS
Hauler Name Hauler Address 312-385-8440

S.W.H. Registration Number

0311012

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE 420 S. COLFAX
(Facility Name) Address

91808902
Site Number

GRIFFITH INDIANA 46319 312-768-3400
City State Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: INK SOLVENT

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

HAZARDOUS

FLAMMABLE

WEIGHT FOR
D.O.T. USE

36,450 LBS
TONS (circle one)

F003

UN 1993

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 4455

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10-6-82

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 10/6/82

(2) (Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 10/6/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8807

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

TO 204K T-50 62M 10/6/82 SITE
002280

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0332898
1 7

SPECIAL WASTE HAULING MANIFEST

Authorization Number 798720
8 13

Chase Prod
(Company Name)
Princeton
City

17th + Gardner Rd.
Address
ILL. 60153
State Zip

RD 0310300006
14 Generator Number 24

Mr. Frank
Hauler Name

201 W. 155th
Hauler Address
So. Holland IL.
Hauler Address

S.W.H. Registration Number 0079021
25 31
IL D067506160
S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem
(Facility Name)
IND.
City

420 L. Cofax
Address
IND.
State Zip

71808702
39 Site Number 46
IN-D016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Paint Solvent

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Flammable

WEIGHT FOR D.O.T. USE 1 TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004000
47 52

1 GALLONS (Circle One)
2 CU. YDS. 1
53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3-29-82

(Authorized Signature)

F-003

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Tom Berry
(Authorized Signature)

DATE: 03/29/82
34 39

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 3/29/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

TO 1A & 1B T-63
GCM 3/29/82

SITE COPY - PART 3

002281

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0332899

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998720

Chase Prod
(Company Name)
Brondview
City

19th + Gardner Rd
Address
ILL
State
60153
Zip

12D0510300006
Generator Number

Mr. Frank
Hauler Name

201 W. 155th St
Hauler Address

512 596-3377
S.W.H. Registration Number

Mr. Frank
Hauler Name

50. Holland St
Hauler Address

12D067506160
S.W.H. Registration Number

American Chem
(Facility Name)
City

420 E. Co. Rd
Address
IND.
State

312-768-3400
71808902
Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Paint Solvent

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS

FLAMMABLE

Flammable

WEIGHT FOR
D.O.T. USE 1993
LBS
TONS (circle one)

Liquid

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 005000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 5-14-82

Berry L. Boeger
(Authorized Signature)

F-003

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Yam Berry
(Authorized Signature)

DATE: 05/14/82

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE: YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

FDH
(Authorized Signature)

DATE: 5/14/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

TO 120K T-63 6PM 5-14-82

SITE COPY - PART 3

002282

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0332900

SPECIAL WASTE HAULING MANIFEST

Authorization Number 978720
8 13

Chase Prod
(Company Name)
Princeton
City

174 + Gardner Rd
Address
Ill 60153
State Zip

120310300006
14 Generator Number 24

Mr Frank
Hauler Name

201 W 155th
Hauler Address
So. Holland Il
Hauler Address

312-516-2271
S.W.H. Registration Number 25
110069506160
S.W.H. Registration Number 32

American Chem
(Facility Name)
Griffith
City

1120 S. Calfax
Address
Ind. 46214
City State Zip

71808702
39 Site Number 46
IND 016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Paint Solvent

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Flammable

WEIGHT FOR D.O.T. USE 32000 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 004500
47 52

1 GALLONS (Circle One)
2 CU. YDS.
53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7-16-82

Henry N. T. Boyer
(Authorized Signature)

F-003

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [Signature]
(Authorized Signature)
(2) [Signature]
(Authorized Signature)

DATE: 07/16/82
54 59
DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[Signature]
(Authorized Signature)

DATE: 7-16-82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

TO 120 RT-63 GRM 7-16-82

SITE COPY - PART 3
002283

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0332901

SPECIAL WASTE HAULING MANIFEST

Authorization Number 8 13

Chase Prod 17th + Gardner Rd
(Company Name) Address
Rondview Ill. 60153
City State Zip

11D0310300006
14 Generator Number 24

Mr. Frank 201 W 155th St
Hauler Name Hauler Address
S.W.H. Registration Number 0079009
31

50. Holland IL
Hauler Name Hauler Address
S.W.H. Registration Number 11D069506160
32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chem 1202 E. 312-760-3400
(Facility Name) Address
Griffith Ind 46319
City State Zip
11D 016360265
39 Site Number 46

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Paint - solvent
WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Flammable

WEIGHT FOR D.O.T. USE LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 005000
47 52

1 GALLONS (Circle One)
2 CU. YDS. 1
33

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 7-3-82

Larry N. L. Boeger
(Authorized Signature)

NA 1993

F-003

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Small H. Bult
(Authorized Signature)

DATE: 09/03/82
54 59

(2)
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

H. Bult
(Authorized Signature)

DATE: 9/3/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

To 117K T-63 6PM 9-382

SITE COPY - PART 3

002284

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0332902

SPECIAL WASTE HAULING MANIFEST

Authorization Number MANANA

Chase Prod
(Company Name)
Brondview
City:

17th + 6th Ave. Rd
Address
IL
State
60153
Zip

11D 0310300006
Generator Number

Mr. Frank
Hauler Name

201 W 15th St
WASTE HAULER(S)
Hauler Address

0079018
S.W.H. Registration Number

So. Holland IL
Hauler Name

50. Holland IL
Hauler Address

11D 067506160
S.W.H. Registration Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chem
(Facility Name)
Griffith
City

120 E. Pax
Address
Ind.
State
46319
Zip

91808702
Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Paint Solvent

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: NA 1993
F003
HAZARD CLASS: Flammable

WEIGHT FOR D.O.T. USE: 37,500 LBS
(circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 005000

GALLONS (Circle One)
1
CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS ☒ TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10-8-82

Henry A. Z. Boyer
(Authorized Signature)

F-003

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Robert Perkins
(Authorized Signature)

DATE: 10/08/82

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ☒ NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Asselee
(Authorized Signature)

DATE: 10/8/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

T0119 R7-63 GRM 10. SITE COPY - PART 3
002285

CHASE PROD. 19th E. 6th
(Company Name) Address
BROADVIEW ILL 60153
City State Zip

MA FRANK 201 W. 155TH ST.
Hauler Name Hauler Address
S. HOLLAND ILL 60473
Hauler Name Hauler Address
S.W.H. Registration Number 0017-
IL0010284248
23 31
S.W.H. Registration Number 32 38

AMERICAN CHEM. 420 S. COLEMAN
(Facility Name) Address
GOFFITH IN 46319
City State Zip
91808902
39 Site Number 46
IN D016360265

TO BE COMPLETED BY WASTE GENERATOR
WASTE NAME: Solvents WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: N.A. 1793
SHIPPING DESCRIPTION: Waste Paint Solvent Flammable HAZARD CLASS:
WEIGHT FOR D.O.T. USE LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 005000
1 GALLONS (Circle One)
2 CU. YDS. 1
47 52 33

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)
THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION
DATE: 12-3-82
(Authorized Signature)

WASTE HAULER
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:
(1) (Authorized Signature) DATE: 12/03/82
(2) (Authorized Signature) DATE: 1/1/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*
HAZARDOUS WASTE SUBJECT TO FEE YES NO
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:
(Authorized Signature) DATE: 12/03/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

To 212 K.T.-50 6PM 12.3.82
SITE COPY - PART 3
002286

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0332897

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998720
8 13

Chase Prod.

19th + Gardner Rd.

(Company Name)
Broadview

Address

Ill.

60153

City

State

Zip

ILD 0310300006
14 Generator Number 24

Mr. Frank

Hauler Name

201 W. 155th

Hauler Address

50. N. 11th St. Ill.

Hauler Name

Hauler Address

S.W.H. Registration Number 00791051
25 31

IL D069506160

S.W.H. Registration Number
32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chem

420 S. Cota x

71808902

(Facility Name)
Griffith

Address

Ind.

City

State

Zip

IN-D016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Paint Solvent

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Flammable

WEIGHT FOR D.O.T. USE 4000 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 004500
47 52

1 GALLONS (Circle One)
2 CU. YDS. 1
53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1-29-82

Perry A. L. Berger
(Authorized Signature)

F-003

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [Signature]
(Authorized Signature)

DATE: 01/29/82
54 59

(2)
(Authorized Signature)

DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[Signature]
(Authorized Signature)

DATE: 01/29/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

To 120K T-63 6RM 1/29/82 SITE COPY - PART 3

002287

**TO BE COMPLETED BY
WASTE GENERATOR**

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0471301

Authorization Number 997035

ILD 005198866

ADHERON COATINGS CORP 16420 S. KILBOURN (312) 617-0010 0312190001
(Company Name) Address Phone Number Generator Number
DNR FOREST IL 60452
City State Zip
EPA Number

WASTE HAULER(S)

MR FRANK INC 201 W. 155th St 0079001
Hauler Name Hauler Address S.W.H. Registration Number
501 HOLLAND, IL ILD 069506160
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number
Phone Number EPA Number

AMERICAN CHEMICAL SERVICE 420 S. COLFAX 91808902
(Facility Name) Address Site Number
GRIFFITH IND IND 06366245
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

**TO BE COMPLETED BY
WASTE GENERATOR**

WASTE NAME: PAINT SOLVENTS WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

LIQUID FLAMMABLE UN1993
UN or NA Number EPA HW Number

WEIGHT FOR D.O.T. USE LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 002500
47 52 53

METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Shirley Sabados DATE: 2/1/82
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:
(1) [Signature] DATE: 02/01/82
(Authorized Signature) 54 59
(2) _____ DATE: _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ☒ NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:
Bob Mauck DATE: 02/01/82
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: 9:30 11:40

IN ILLINOIS, 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS, 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 - GENERATOR
REV. # 3

SITE COPY - PART 3

To 125 F T-63 6PM 2/1/82

002288

TO BE COMPLETED BY
WASTE GENERATOR

NON HAZARDOUS STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706

(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

Authorization Number

0471303

997035

ASHGREN CORP
(Company Name)

11420 S KILBOURN (312) 687-0010
Address Phone Number

OAK FOREST
City

IL 60452
State Zip

ILDA 00519886
Generator Number EPA Number

WASTE HAULER(S)

MR FRANK INC
Hauler Name

201 W. 155th ST
Hauler Address
So. Holland, IL

S.W.H. Registration Number 0079001
ILDA 069506160
EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

Phone Number

EPA Number

AMERICAN CHEMICAL
(Facility Name)

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE
420 S COLFAX
Address

GRIFFITH
City

IND
State Zip

Phone Number

91808902
Site Number
016360265
EPA Number

Alternate (Facility Name)

Address

39 Site Number 40

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Liquid

FLAMMABLE

UN1993
UN or NA Number

EPA HW Number

WEIGHT FOR
D.O.T. USE

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 3000
47 52

1 GALLONS (Circle One)
2 CU. YDS. 1
53

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Aminda Rapp
(Authorized Signature)

DATE: 3/26/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) M. R. Rapp
(Authorized Signature)

DATE: 3/26/82
54 59

(2)
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 3/26/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

002289

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0471302

Authorization Number 997035

ILD 005198866

ADHERON COATINGS CORP. 16420 S. KILDURN (312) 687-0010 0312190001
(Company Name) Address Phone Number Generator Number

OAK FOREST IL 60452
City State Zip

EPA Number

WASTE HAULER(S)

MR. FRANK INC 201 W. 155th St 0079001
Hauler Name Hauler Address S.W.H. Registration Number

SO. HOLLAND, IL 069508160
Hauler Address Phone Number EPA Number

S.W.H. Registration Number 069508160

Phone Number EPA Number

AMERICAN CHEMICAL SERVICE 420 S. COLEMAN 91808902
(Facility Name) Address Site Number

GRIFFITH IND. IND 016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number

City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: LIQUID HAZARD CLASS: FLAMMABLE UN or NA Number UN1993 EPA HW Number

WEIGHT FOR D.O.T. USE LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 3000 3 GALLONS (Circle One) CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Shirley Sabados DATE: 3/2/82
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Mike Reifer DATE: 03/02/82
(Authorized Signature)

(2) _____ DATE: ____/____/____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEG. YES X NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

_____ DATE: ____/____/____
(Authorized Signature)

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3 TO 125 KT-63 62M 3/2/82 002290

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0471304

Authorization Number 997035

ADHERON COATING CORP. 16420 S. KILBOURN 312-687-0010 0312190001
(Company Name) Address Phone Number Generator Number
OAK FOREST IL 60445 ILD 005198866
City State Zip EPA Number

WASTE HAULER(S)

MR. FRANK INC 201 W. 155th ST. 0079001
Hauler Name Hauler Address S.W.H. Registration Number
SO. HOLLAND, IL. 3125963377 ILD 069506160
Hauler Name Hauler Address Phone Number EPA Number

AMERICAN CHEMICAL 420 S. COLFAX 91808902
(Facility Name) Address Site Number
GRIFFITH IND 2199244370 IND 016360265
City State Zip Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
AMERICAN CHEMICAL 420 S. COLFAX 91808902
(Facility Name) Address Site Number
GRIFFITH IND 2199244370 IND 016360265
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR
WASTE NAME: PAINT SOLVENTS WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW.
SHIPPING DESCRIPTION: LIQUID HAZARD CLASS: FLAMMABLE UN1993 8005
UN or NA Number EPA HW Number

WEIGHT FOR D.O.T. USE 003000 LBS TONS (circle one) 0 QUANTITY OF WASTE DELIVERED: 003000 0 GALLONS (Circle One) 0 CU. YDS. 0

METHOD OF SHIPMENT (Circle One) (DRUMS) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION Shirley Sabados DATE: 4-30-82
(Authorized Signature)

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Mike Bifer DATE: 4/30/82
(Authorized Signature) (54) (59)
(2) DATE: 4/30/82
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES X NO
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:
F. Murphy DATE: 4/30/82
(Authorized Signature) (60) (65)

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR
REV. # 3

SITE COPY - PART 3

TO 124 FT-63 GRM 4/30/82 002291

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0471305

Authorization Number 997035

ADHERON COATING CORP 16420 S. KILBOURN 312-687-0010 0312190001
(Company Name) Address Phone Number Generator Number
DAK FOREST IL 60452 ILD 005198866
City State Zip EPA Number

WASTE HAULER(S)

MR. FRANK INC 201 W. 155th ST 312-596-3377 0079003
Hauler Name Hauler Address Phone Number S.W.H. Registration Number
SO. HOLLAND, IL IL 60452 ILD 069506160
Hauler Name Hauler Address Phone Number S.W.H. Registration Number

AMERICAN CHEMICAL 420 S. COLFAX 91808902
(Facility Name) Address Site Number
GRIFFITH IND 46319 2199244370 IND 016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

LIQUID

FLAMMABLE

UN1993
UN or NA Number

FE05
EPA HW Number

WEIGHT FOR
D.O.T. USE

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 003000

0 GALLONS (Circle One)
2 CU YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS

Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 6/24/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) H. Helms
(Authorized Signature)

DATE: 06/24/82

(2) [Signature]
(Authorized Signature)

DATE: 1/1/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 6/24/82

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 124KT-63 GRM 6-24-82

002292

**TO BE COMPLETED BY
WASTE GENERATOR**

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0471306

Authorization Number

~~997035~~

ADDERON COLLINGS 16420 S. KILBOURN 312 687 0010 0-312 190001
(Company Name) Address Phone Number Generator Number
City State Zip EPA Number
ILLD 005198866

WASTE HAULER(S)

MR FRANK INC 201 N. 155TH ST 312 596 3377 0079008
Hauler Name Hauler Address Phone Number S.W.H. Registration Number
SO HOLLAND, IL IND 069506160
Hauler Name Hauler Address Phone Number S.W.H. Registration Number
EPA Number

Hauler Name Hauler Address Phone Number S.W.H. Registration Number
EPA Number

AMERICAN CHEMICAL 120 Y CULFAX 91808902
(Facility Name) Address Site Number
GRIFFITH IND 46317 219-924-370 IND 016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

**TO BE COMPLETED BY
WASTE GENERATOR**

WASTE NAME: PAINT SOLVENTS WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Liquid

FLAMMABLE

UN1993
UN or NA Number

4078
EPA HW Number

WEIGHT FOR
D.O.T. USE

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 00 1750

47

52

53

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS

Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND T.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

[Signature]
(Authorized Signature)

DATE: 9-1-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED.

(1) [Signature]
(Authorized Signature)

(2) [Signature]
(Authorized Signature)

DATE: 9/1/82

DATE: 9/1/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES YES NO NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

[Signature]

DATE: 9/1/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. #3

SITE COPY - PART 3

TC125RT-63 6/1/82 9-1-82

002293

**TO BE COMPLETED BY
WASTE GENERATOR**

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0471307

997035

Authorization Number 8 13

Adheron Coating Corp. 16420 S. Kilbourn 312-687-0010 0312190001
(Company Name) Address Phone Number 14 Generator Number 24
DAK FOREST IL 60452 ILD 005198866
City State Zip EPA Number

MR. FRANK INC 201 W. 155th ST. 312-596-3377 0079001
Hauler Name Hauler Address Phone Number 25 S.W.H. Registration Number 31
SO. HOLLAND, IL ILD 069506160
City State Zip EPA Number

Hauler Name Hauler Address Phone Number 32 S.W.H. Registration Number 38 EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American chemical service 420 S. Colfax 91808902
(Facility Name) Address 39 Site Number 40
GRIFFITH IND 46319 2199244370 IND 016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 40
City State Zip Phone Number EPA Number

**TO BE COMPLETED BY
WASTE GENERATOR**

WASTE NAME: PAINT SOLVENTS WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

Liquid

Flammable

UN1993
UN or NA Number

F005
EPA HW Number

WEIGHT FOR D.O.T. USE LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 1800 1 GALLONS (Circle One) 2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Shirley J. Lintz
(Authorized Signature)

DATE: 9/30/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [Signature]
(Authorized Signature)

DATE: 9/30/82

(2) [Signature]
(Authorized Signature)

DATE: 9/30/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[Signature]
(Authorized Signature)

DATE: 9/30/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 124K T-63 6PM

9.30.82
002294

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0471310

Authorization Number 8 13

Adheron Coatings 16420 S. Kilbourn (312) 687-0010 0312190001
(Company Name) Address Phone Number Generator Number
Oak Forest ILL. 60452 ILL 005198866
City State Zip EPA Number

WASTE HAULER(S)

Mr. Frank Inc. 201 W. 155th St. 0079001
Hauler Name Hauler Address S.W.H. Registration Number
So. Holland, Ill. 3125763377 ILL 069506160
Hauler Name Hauler Address Phone Number EPA Number

S.W.H. Registration Number 32 38

Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical 420 S. Colfax 918089902
(Facility Name) Address Site Number
Griffith IND. 3127683400 IND 016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Paint Solvents

WASTE PHASE: Liquid

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

Liquid

Flammable

UN 1993

UN or NA Number

K078

EPA HW Number

WEIGHT FOR LBS
D.O.T. USE TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 602000 52 2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 11/04/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 11/04/82 54 59

(2) (Authorized Signature)

DATE: 11/04/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 11/04/82 60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

TO 124 K T-63 G/M 11.4.82

002295

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

04713

Authorization Number

8

Adheron Coatings

(Company Name)

16420 S. Kilbourn

Address

(312) 687-0010

Phone Number

0312190001

14

Generator Number

Oak Forest

City

Illinois

State

60452

Zip

ILD 005198866

EPA Number

WASTE HAULER(S)

Mr. Frank Inc.

Hauler Name

201 W. 155th St.

Hauler Address

SO. Holland, Ill.

312 5963377

Phone Number

S.W.H. Registration Number

0079004

25

ILD 069506160

EPA Number

S.W.H. Registration Number

32

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical

(Facility Name)

420 S. Colfax

Address

918089902

39

Site Number

Griffith

City

Ind.

State

Zip

312 7683400

Phone Number

IND 016360265

EPA Number

Alternate (Facility Name)

Address

39

Site Number

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Paint Solvents

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Liquid

Flammable

UN 1993

UN or NA Number

5078

EPA HW Number

WEIGHT FOR
D.O.T. USE

LBS

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED:

00 7500

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Shirley L. Lintz

(Authorized Signature)

DATE: 12/10/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) Ronald B. Bridgman

(Authorized Signature)

DATE: 12/10/82

(2)

(Authorized Signature)

DATE: 12/10/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Shirley L. Lintz

(Authorized Signature)

DATE: 12/10/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

REV. # 3

SITE COPY - PART 3

TO 124 RT-63 6RM 12-10-82

002296

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0364596
1 7

Authorization Number 9 9 1 4 8 4
8 13

Acme Solvent Reclaiming

(Company Name)

1915 20th Avenue

Address

Rockford

City

IL

State

61108

Zip

2 0 1 0 3 0 0 0 2 5 G

Generator Number

ILD053219259

24

Acme Solvent Reclaiming

Hauler Name

Rockford, IL 61108

Hauler Address

S.W.H. Registration Number 0 0 7 0 0 0 2
25 31

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical

(Facility Name)

319 South Colfax

Address

9 1 8 0 8 9 0 2
39 46

Site Number

City

State

Zip

IND006360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Organic Solvent

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Solvent Waste N.O.S.

Flammable UN 1993

WEIGHT FOR D.O.T. USE 15,500 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 2 0 0 0
47 52

1 GALLONS (Circle One)
2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: Jan. 16-82

Walter P. P. (Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Ken Bergeron (Authorized Signature)

DATE: 1 16 82 59

(2) (Authorized Signature)

DATE: 1 16 82 60

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 1 16 82 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

To 210 R T-50 6PM 1/6/82

SITE COPY - PART 3

002297

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0364598
1 7

Authorization Number 9 9 1 4 3 4
8 13

Acme Solvent Reclaiming

(Company Name)

1915 20th Avenue

Address

Rockford

City

IL

State

61108

Zip

2 0 1 0 3 0 0 0 2 5
14 24
Generator Number

ILD053219259

Acme Solvent Reclaiming

Hauler Name

Rockford, IL 61108

Hauler Address

S.W.H. Registration Number 0 0 7 0 0 0 2
25 31

Hauler Name

Hauler Address

S.W.H. Registration Number
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical

(Facility Name)

319 South Colfax

Address

9 1 8 0 8 9 0 2
39 46
Site Number

Griffith

City

IND

State

46319

Zip

IND006360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Organic Solvent

WASTE PHASE: liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Solvent Waste N.O.S.

Flammable UN1993

WEIGHT FOR D.O.T. USE 15500 LBS
(circle one) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 2 0 0 0
47 52

1 GALLONS (Circle One)
2 CU. YDS. 1
53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1/8/82 1/11/82

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Ken Pagon
(Authorized Signature)

DATE: 1/11/82

(2)
(Authorized Signature)

DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 1/12/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

TO 210 R T-50 6em 1/12/82

SITE COPY - PART 3

002298

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0364589

991484

Authorization Number ~~991484~~
8 13

Acme Solvent Reclaiming

(Company Name)

1915 20th Avenue

Address

Rockford

City

IL

State

61108

Zip

2010300025

Generator Number
ILD053219259

Acme Solvent Reclaiming

Hauler Name

Rockford, IL

Hauler Address

S.W.H. Registration Number 0070002
25 31

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Co

(Facility Name)

319 South Colfax

Address

Griffith

City

Indiana

State

46319

Zip

91808902

Site Number 39 46

~~IND006360265~~
IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Organic Solvent

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Solvent Waste N.O.S

Flammable UN 1993

WEIGHT FOR
D.O.T. USE

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 2000
47 52

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1-22-82

Marwen Frest
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) Michael S. Pierson
(Authorized Signature)

DATE: 1/22/82
54 59

(2) _____
(Authorized Signature)

DATE: 1/22/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ☒ NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 1/22/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

To 210K T-50 6RM 1/22/82

SITE COPY - PART 3

002299

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0364599

Authorization Number 991484
8 13

Acme Solvent Reclaiming Inc.
(Company Name)

1915 20th Avenue

Rockford

IL

61108

2010300025

Generator Number

City

State

Zip

ILD053219259

Acme Solvent Reclaiming
Hauler Name

Rockford, IL

Hauler Address

S.W.H. Registration Number 0070002
25 31

Hauler Name

Hauler Address

S.W.H. Registration Number
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical
(Facility Name)

319 South Colfax

Address

91808902

Site Number 39 46

Griffith

Ind.

46319

IND000360265

City

State

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Organic Solvent

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Solvent Waste N.O.S

Flammable UN 1993

WEIGHT FOR D.O.T. USE 15,000 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 2000
47 52

1 GALLONS (Circle One)
2 CU. YDS. 1
53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION.

DATE: 1-15-82

Warren Fric
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)

Van Begeron
(Authorized Signature)

DATE: 1/15/82

(2)

(Authorized Signature)

DATE: 1/15/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

J. Dimpfe
(Authorized Signature)

DATE: 1/15/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

TO 211 RT-50 61M 1/15/82

SITE COPY - PART 3

002300

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0381813

Authorization Number 991 4 84
8 13

Acme Solvent Reclaiming
(Company Name)
Rockford
City

1915 20th Avenue
Address
IL
State
61108
Zip

20103 000 25
Generator Number
ILD053219259

Acme Solvent REclaiming
Hauler Name
Rockford, IL
Hauler Address

S.W.H. Registration Number 0070002
25 31

Hauler Name Hauler Address

S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical
(Facility Name)
Griffith
City

319 South Colfax
Address
IND.
State
46319
Zip

91308902
Site Number
IND006360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Organic Solvent

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Solvent Waste N.O.S. Flammable UN 1993

WEIGHT FOR D.O.T. USE LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 2000
47 52

1 GALLONS (Circle One)
2 CU. YDS. 1
53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: Jan. 27, 1982

Harvey Fries
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Michael S. Reism
(Authorized Signature)

DATE: 4 27 82
54 59

(2) _____
(Authorized Signature)

DATE: 1 1 1

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Bob J. Jancik
(Authorized Signature)

DATE: 0 12 71 82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

TO 211 K T-50 GRM 1/27/82

SITE COPY - PART 3

002301

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0381816
1 7

Authorization Number 991484
8 13

Acme Solvent Reclaiming 1915 20th Avenue
(Company Name) Address
Rockford, IL 61108
City State Zip

2010300025
14 Generator Number 24
ILD053299259

Acme Solvent Reclaiming Rockford, IL 61108
Hauler Name Hauler Address
Hauler Name Hauler Address

S.W.H. Registration Number 0070002
25 31

S.W.H. Registration Number
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Co. 319 South Colfax
(Facility Name) Address
City State Zip

91808902
39 Site Number 46

IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Organic Solvent

WASTE PHASE: Liquid Waste
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Solvent Waste N.O.S.

Flammable UN1993

WEIGHT FOR D.O.T. USE LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 2000
47 52

1 GALLONS (Circle One)
2 CU. YDS.
33

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: Jan. 29, 1982

Warren Frest
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Michael S. Person
(Authorized Signature)

DATE: 11/29/82
34 39

(2)
(Authorized Signature)

DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Bob M. Muehl
(Authorized Signature)

DATE: 01/29/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

TO 205 K T-50 GRM 1/29/82

SITE COPY - PART 3

002302

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0364600

Authorization Number 9 9 1 4 8 4
8 13

Acme Solvent Reclaiming

1915 20th Ave.

(Company Name)

Address

Rockford

IL

61108

City

State

Zip

2 0 1 0 3 0 0 0 2 5 6
14 Generator Number 24

ILD053219259

WASTE HAULER(S)

Acme Solvent Reclaiming

Rockford, IL

Hauler Name

Hauler Address

S.W.H. Registration Number 0 0 7 0 0 0 2
25 31

Hauler Name

Hauler Address

S.W.H. Registration Number
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical

319 South Colfax

(Facility Name)

Address

9 1 8 0 8 9 0 2
39 Site Number 46

Griffith

Ind.

46319

City

State

Zip

IND006360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Organic Solvent

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Solvent Waste

N.O.S.

Flammable

UN1993

WEIGHT FOR
D.O.T. USE

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED:

2 0 0 0
47 52

1 GALLONS (Circle One)
2 CU. YDS. 1
53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1/22/82 2/5/82

Warren Frest
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Michael S. Pierson
(Authorized Signature)

DATE: 2 15 1 82
34 59

(2) _____
(Authorized Signature)

DATE: 1 1 1

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO ☒

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Bob Mauck
(Authorized Signature)

DATE: 02 05 82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

TO 210 TR T-50 GRM 2/5/82

SITE COPY - PART 3

002303

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0364594

Authorization Number 9 9 1 4 8 4
8 13

Acme Solvent Reclaiming

(Company Name)

1915 20th Avenue

Address

Rockford

IL

61108

City

State

Zip

20103000256
14 24
Generator Number

ILD053219259

WASTE HAULER(S)

Acme Solvent Reclaiming

Hauler Name

Rockford, IL

Hauler Address

S.W.H. Registration Number 0 0 7 0 0 0 2
23 31

Hauler Name

Hauler Address

S.W.H. Registration Number _____
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical

(Facility Name)

319 South Colfax

Address

Griffith Indiana

City

State

46319

Zip

91808902
39 46
Site Number

IND046360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Organic Solvent

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Solvent Waste N.O.S.

Flammable UN 1993

WEIGHT FOR D.O.T. USE 15500 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 2000
47 52

1 GALLONS (Circle One)
2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12-30-81

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Ken Degeiro
(Authorized Signature)

DATE: 12/30/81
54 59

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 12/30/81
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

T6211K T-50 CRM

12/20/81

SITE COPY - PART 3

002304

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0364593

Authorization Number 991484

Acme Solvent Reclaiming

1915 20th Avenue

(Company Name)

Address

Rockford

Illinois

61103

2010300025

Generator Number

City

State

Zip

ILL053219259

Acme Solvent Reclaiming

Rockford, IL

WASTE HAULER(S)

Hauler Name

Hauler Address

S.W.H. Registration Number 0070002

Hauler Name

Hauler Address

S.W.H. Registration Number 32

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical

319 South Colfax

(Facility Name)

Address

91808902

Site Number

Griffith

Indiana

46319

IND006360265

City

State

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Organic Solvent

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Solvent Waste N.O.S.

Flammable UN 1993

WEIGHT FOR D.O.T. USE 15000 LBS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 2000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12/22/81

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Ken Degeen

(Authorized Signature)

DATE: 12/22/81

(2)

(Authorized Signature)

DATE: 12/22/81

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 12/22/81

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

TO 211R T-50 GRM 12/22/81

SITE COPY - PART 3

002305

**TO BE COMPLETED BY
WASTE GENERATOR**

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0590462

Authorization Number **920479**

ACME SOLVENT REC 1915 20th AVE 3970289 20103000256
(Company Name) Address Phone Number Generator Number
ROCKFORD ILL 61107 140053217259
City State Zip EPA Number

WASTE HAULER(S)

ACME SOLVENT 1915 20th AVE S.W.H. Registration Number 007000
Hauler Name Hauler Address 25 31
Phone Number EPA Number
Hauler Name Hauler Address S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL G 91
(Facility Name) Address 39 40
GRIFFITH IND 46319 2199744301NC
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 40
City State Zip Phone Number EPA Number

**TO BE COMPLETED BY
WASTE GENERATOR**

WASTE NAME: STILL BOTTOMS WASTE PHASE: _____
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

SOLVENT MGS A UN or NA Number EPA HW Number

WEIGHT FOR D.O.T. USE 7 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 2000 2 GALLONS (Circle One) 2 CU. YDS.
47 52 53

METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION M. Purnell DATE: 4/19/82
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) M. Purnell DATE: 4/19/82
(Authorized Signature) 54 59
(2) _____ DATE: _____
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE
[Signature] DATE: 4/19/82
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS: _____

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV. # 3

SITE COPY - PART 3

TO 210 F T-50 GRM 4.19.82

002306

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0381815

SPECIAL WASTE HAULING MANIFEST

Authorization Number 991488
8 13

Acme Solvent Reclaiming
(Company Name)

1915 20th Avenue
Address

Rockford
City

IL
State

61108
Zip

20103000256
Generator Number
14 24
ILD053219259

Acme Solvent Reclaiming
Hauler Name

Rockford, IL 61108
Hauler Address

S.W.H. Registration Number 0070002
25 31

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Co.
(Facility Name)

319 South Colfax
Address

91808902
Site Number
39 46

Griffith Indiana
City

46319
State

46319
Zip

IND016360265
IND006369265X

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Organic Solvent

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Solvent N.O.S.

Flammable UN 1993

WEIGHT FOR D.O.T. USE LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 2000
47 52

1 GALLONS (Circle One)
2 CU. YDS.
33

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4/23/82

Harold E. Frost
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) M. P. P. P. P.
(Authorized Signature)

DATE: 04/23/82
54 59

(2)
(Authorized Signature)

DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

(Authorized Signature)

DATE: 4/23/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

To 210KT-50 GPM 4.23.82

SITE COPY - PART 3
002307

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0381814
1 7

Authorization Number 9911814

Acme Solvent Reclaiming

1915 20th Avenue

(Company Name)

Address

191X Rockford, IL

City

State

Zip

20103000256

Generator Number

ILD053219259

Acme Solvent Reclaiming

Hauler Name

Rockford, IL

Hauler Address

S.W.H. Registration Number 0070002

25

31

Hauler Name

Hauler Address

S.W.H. Registration Number

32

38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Co

(Facility Name)

319 South Colfax

Address

Griffith

City

Indiana

State

46319

Zip

312763340091808902

39

Site Number

46

IND000000256
IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Organic Solvent

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Solvent Waste N.O.S.

Flammable UN1993

WEIGHT FOR
D.O.T. USE

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED:

2000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: July 21, 1982

Warren Fries
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Michael Pungolia
(Authorized Signature)

DATE: 7/21/82

(2)
(Authorized Signature)

DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 7/21/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

SECTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

TO 210K T-50 GRM 7-21-82

SITE COPY - PART 3

002308

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0381817

SPECIAL WASTE HAULING MANIFEST

Authorization Number 8 13

~~American Chemical~~ Acme Solvent Reclaiming 1915 20th Ave. Tel.: 1-815-397-0289

(Company Name)

Address

Rockford,

IL

61108

City

State

Zip

20103000256

Generator Number

ILD053219259

WASTE HAULER(S)

Acme Solvent Reclaiming

Rockford, IL 61108

S.W.H. Registration Number 0070002

Hauler Name

Hauler Address

1-815-397-0289

S.W.H. Registration Number 32 38

Hauler Name

Hauler Address

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

Tel: 1-312-768-3400

91808902

American Chemical Co.

319 South Colfax

XXXXXXXXXX

(Facility Name)

Address

Site Number 46

City

State

Zip

IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Organic Solvent

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

FO05

SHIPPING DESCRIPTION:

HAZARD CLASS:

Solvent Waste N.O.S.

Flammable UN1993

WEIGHT FOR
D.O.T. USE

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 2000

1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: JULY 30, 1982

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Michael Pummelia
(Authorized Signature)

DATE: 7/30/82

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 7/30/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

TO 210R T 50 6PM 7-30-82

SITE COPY - PART 3

002309

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0411188

Authorization Number 8 13

ACME SOLVENT RECLAIMING INC 1915 20th Ave. 8153970289 2010300025 G
(Company Name) Address Phone Number Generator Number 24
Rockford IL 61108 IL D 053219259
City State Zip EPA Number

WASTE HAULER(S)

Acme Solvent Reclaiming Rockford, IL 61108 8153970289
Hauler Name Hauler Address Phone Number
S.W.H. Registration Number 0070002 25 31
EPA Number

Hauler Name Hauler Address Phone Number
S.W.H. Registration Number 32 38
EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Co 319 South Colfax 91808902
(Facility Name) Address Site Number 39 40
Griffith IND 46319 3137683400 IND 016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number 39 40
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Organic Solvent WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Solvent Waste M.O.S. Flammable UN 1993 F 005
UN or NA Number EPA HW Number

WEIGHT FOR LBS WEIGHT FOR I.E.P.A. USE MUST BE QUANTITY OF WASTE DELIVERED: 2000 2 GALLONS (Circle One)
D.O.T. USE TONS (circle one) CONVERTED TO CU. YDS. OR GAL. 47 52 2 CO. YDS. 1 53

METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Harvey Frost
(Authorized Signature)

DATE: 8-11-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Mike Pungilia
(Authorized Signature)
(2) (Authorized Signature)

DATE: 8/11/82 54 59
DATE: 8/11/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 8/11/82 60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 210K T-50 61M 8-11-82

002310

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0411189

Authorization Number 8 13

ACME SOLVENT RECLAIMING
(Company Name)

1915 20th Avenue
Address

815-3970289
Phone Number

2010300025
Generator Number

City

State

Zip

ILDO53219259
EPA Number

WASTE HAULER(S)

Acme Solvent Reclaiming Rockford, IL 61108
Hauler Name Hauler Address

S.W.H. Registration Number 0070002
25 31

8153970286
Phone Number

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical
(Facility Name)

319 South Golf
Address

91808902
Site Number

Griffith
City

INC
State

46319
Zip

2137683400
Phone Number

IND016360265
EPA Number

Alternate (Facility Name)

Address

39 Site Number 46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Organic Solvent

WASTE PHASE: Liquid

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW.

(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

Solvent Waste NOS

Flammable

UN 1993
UN or NA Number

F005
EPA HW Number

WEIGHT FOR LBS
D.O.T. USE TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 2000
47 52 1 GALLONS (Circle One)
2 CU. YDS. 1 53

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Harold Friest
(Authorized Signature)

DATE: 9/20/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) Mike Pusula
(Authorized Signature)

DATE: 9/20/82
54 59

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE

(Authorized Signature)

DATE: 9/20/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 211 K 7-50 6PM 9.20.82

002311

**TO BE COMPLETED BY
WASTE GENERATOR**

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0624674

Authorization Number 8 _____ 13

2010300025

Generator Number 14 ~~XXXXXXXXXXXX~~ 24

EPA Number ILD 053219259

Acme Solvent Reclaiming 1915 20th Ave.
(Company Name) Address

815 397 0289
Phone Number

City State Zip

WASTE HAULER(S)

Acme Solvent Reclaiming Rockford, IL 61108
Hauler Name Hauler Address

S.W.H. Registration Number 0070002
25 31

815 397 0289
Phone Number

EPA Number

Hauler Name Hauler Address

S.W.H. Registration Number 32 38

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical 319 South Colfax
(Facility Name) Address

91808902
39 Site Number 40

Griffith IND. 46319
City State Zip

2137683400 IND016360285
Phone Number EPA Number

Alternate (Facility Name) Address

39 Site Number 40

City State Zip

Phone Number

EPA Number

**TO BE COMPLETED BY
WASTE GENERATOR**

WASTE NAME: Organic Solvent

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Solvent Waste N O S Flammable

UN 1993
UN or NA Number

F 005
EPA HW Number

WEIGHT FOR D.O.T. USE _____ LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 2000 1 GALLONS (Circle One)
47 52 2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One)

(DRUMS _____) Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Warren T. Hunt
(Authorized Signature)

DATE: 10-13-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Mike Lumelia
(Authorized Signature)

DATE: 10/13/82
54 59

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 10/13/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

To 211KT-SO 612M 10.13.82
002312

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0670628

TO BE COMPLETED BY
WASTE GENERATOR

Authorization Number 8 13

Acme Solvent Reclaiming 1915 20th Ave me 8 1 5 3 9 7 0 2 8 9 2 0 1 0 3 0 0 0 2 5
(Company Name) Address Phone Number Generator Number
Rockford IL 61108 I L D 0 5 3 2 1 9 2 5 9
City State Zip EPA Number

WASTE HAULER(S)

Acme Solvent Reclaiming Rockford, IL 61108
Hauler Name Hauler Address
8 1 5 3 9 7 0 2 8 9 I L D 0 5 3 2 1 9 2 5 9
Phone Number EPA Number

Hauler Name Hauler Address
S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical 319 South Colfax 9 1 8 0 8 9 0 2
(Facility Name) Address Site Number
Griffith IND 46319 2 1 3 7 6 8 3 4 0 0 I N D 0 1 6 3 6 0 2 6 5
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Organic Solvent

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Solvent Waste NOS

Flammable

U N 1 9 9 3
UN or NA Number

F 0 0 5
EPA HW Number

WEIGHT FOR LBS
D.O.T. USE TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 2 0 0 0
47 52 1 GALLONS (Circle One)
2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Harvey Frest
(Authorized Signature)

DATE: 10-26-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) M. K. Pencilis
(Authorized Signature)

DATE: 10/26/82
54 59

(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 10/26/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

REV. # 4

SITE COPY - PART 3

TO 2107E T-50 GRM 10.26.82

002313

**TO BE COMPLETED BY
WASTE GENERATOR**

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0670636

Authorization Number 8 13

Acme Solvent Reclaiming 1915 20th Ave. 8 1 5 3 9 7 0 2 8 9 2 0 1 0 3 0 0 0 2 5
(Company Name) Address Phone Number 14 Generator Number 24
Rockford IL 61108 I LD 0 5 3 2 1 9 2 5 9
City State Zip EPA Number

WASTE HAULER(S)

Acme Solvent Reclaiming **Rockford, IL 61108** S.W.H. Registration Number 0 0 7 0 0 0 2
Hauler Name Hauler Address 25 31
8 1 5 3 9 7 0 2 8 9 I LD 0 5 3 2 1 9 2 5 9
Phone Number EPA Number

Hauler Name Hauler Address Phone Number EPA Number
S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
American Chemical 319 South Colfax 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 46
Griffith IND 46319 21376 8 3 4 0 0 IND 0 1 6 3 6 0 2 6 5
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

**TO BE COMPLETED BY
WASTE GENERATOR**

WASTE NAME: **Organic Solvent** WASTE PHASE: **Liquid**
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: **Solvent Waste N O'S** HAZARD CLASS: **Flammable** UN 1993 F 0 0 5
UN or NA Number EPA HW Number

WEIGHT FOR D.O.T. USE LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 2 0 0 0 2 0 0 0
47 52 53

METHOD OF SHIPMENT (Circle One) (DRUMS Number) **TANK TRUCK** OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION *Harold Fricat* DATE: **Nov. 8, 1982**
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *Mike Pumilia* DATE: 11/8/82
(Authorized Signature) 54 59
(2) DATE: / /
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature) DATE: 11/8/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS, 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV. # 4

SITE COPY - PART 3

TO ILL RT-80 GWM 11882

002314

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0670637

Authorization Number 8 13

Acme Solvent Reclaiming 1915 20th Avenue 8153970289 2010300025 G
(Company Name) Address Phone Number 14 Generator Number 24
Rockford IL IL 61108 IL D053219259
City State Zip EPA Number

WASTE HAULER(S)

Acme Solvent Reclaiming Rockford, IL 61108 S.W.H. Registration Number 0070002
Hauler Name Hauler Address 25 31
8153970289 IL D053219259
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemical Rockford, IL 61108 319 S. Colfax 91808902
(Facility Name) Address 39 Site Number 46
Griffith IND 46319 2137683400 IN D016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Organic Solvent

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Solvent Waset N O S

Flammable3

UN 1993
UN or NA Numberf 0 0 5
EPA HW Number

WEIGHT FOR LBS WEIGHT FOR I.E.P.A. USE MUST BE QUANTITY OF WASTE DELIVERED: 2000 2 GALLONS (Circle One)
D.O.T. USE TONS (circle one) CONVERTED TO CU. YDS. OR GAL. 47 52 2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One)

(DRUMS _____)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify) _____

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

M. F. Fries
(Authorized Signature)

DATE: Nov. 11, 1982

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:(1) Mike Purnell
(Authorized Signature)DATE: 11/11/82
54 59(2) _____
(Authorized Signature)

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

J. J. Lee
(Authorized Signature)DATE: 11/11/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

7021127-50 GEM 11.11.82

002315

STATE OF ILLINOIS

TO BE COMPLETED BY
WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0670638
7

Authorization Number 8 13

ACME SOLVENT RECLAIMING INC 1915 20th Ave., 81 53 97 02 89 2010300025
(Company Name) Address Phone Number
Rockford, IL 61108
City State Zip
Generator Number 14
EPA Number 15
I L D 0 5 3 2 1 9 2 5 9

WASTE HAULER(S)

Acme Solvent Reclaiming Rockford, IL 61108
Hauler Name Hauler Address
S.W.H. Registration Number 00 700 02
25 31
81 53 97 02 89 I L D 0 5 3 2 1 9 2 5 9
Phone Number EPA Number

Hauler Name Hauler Address
S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
AMERICAN CHEMICAL 319 S Colvax
(Facility Name) Address
GRIFFITH INDIANA 46319 21 376 83 400 I N D 0 163 60 26 5
City State Zip Phone Number
EPA Number 39
Alternate (Facility Name) Address
City State Zip Phone Number EPA Number 40

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Organic Solvent WASTE PHASE: Liquid
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

NOS Solvent Waste Flammable

U N 1 9 9 3
UN or NA Number

F 0 0 5
EPA HW Number

WEIGHT FOR LBS WEIGHT FOR I.E.P.A. USE MUST BE
D.O.T. USE TONS (circle one) CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 20.00 GALLONS (Circle One)
47 52 2 CU. YDS. 1
53

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION.

Alvin Fries
(Authorized Signature)

DATE: Nov. 17, 1982

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *Mike Rummia*
(Authorized Signature)

DATE: 11/17/82

(2) _____
(Authorized Signature)

DATE: 11/17/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO ☒

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 11/17/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

To JOE T-506/M 11-17-82

002316

**TO BE COMPLETED BY
WASTE GENERATOR**

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0670640

SPECIAL WASTE HAULING MANIFEST

Authorization Number 8 13

ACME SOLVENT RECLAIMING 1915 20th Ave. 815 397 0289 201 03 000 25 G
(Company Name) Address Phone Number Generator Number
Rockford IL 61108 IL D 053 219 259
City State Zip EPA Number

WASTE HAULER(S)

Acme Solvent Reclaiming Rockford, IL 61108
Hauler Name Hauler Address
815 397 0289 IL D 053 219 259
Phone Number EPA Number
S.W.H. Registration Number 007 000 2
25 31

AMERICAN CHEMICAL 319 S. Colfax 918 08 902
(Facility Name) Address Site Number
GRIFFITH IND 46319 213 76 884 00 IND 016 360 265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

**TO BE COMPLETED BY
WASTE GENERATOR**

WASTE NAME: **Organic Solvent** WASTE PHASE: **Liquid**
(Liquid, Gaseous, Solid)
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
SHIPPING DESCRIPTION: **Solvent Waste NOS** HAZARD CLASS: **Flammable**
UN or NA Number: **UN 1993** EPA HW Number: **F 005**

WEIGHT FOR LBS WEIGHT FOR I.E.P.A. USE MUST BE QUANTITY OF WASTE DELIVERED: 2000 1 GALLONS (Circle One)
D.O.T. USE TONS (circle one) CONVERTED TO CU. YDS. OR GAL. 47 52 2 CU. YDS. 1 53
METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION *Thomas J. Frost* DATE: 11-22-82
(Authorized Signature)

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:
(1) *Mike P... ..* DATE: 11/23/82
(Authorized Signature) 54 59
(2) DATE: / /
(Authorized Signature)

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES ☒ NO ☐
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:
Hump... DATE: 11-22-82
(Authorized Signature) 60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0670641

Authorization Number 8 13

ACME SOLVENT RECLAIMING 1915 20th Ave. 8153970289 2010300025 G
(Company Name) Address Phone Number 14 Generator Number 24
Rockford, IL 61108
City State Zip
EPA Number IL D 0 53 21 9 25 9

WASTE HAULER(S)

Acme Solvent Reclaiming Rockford, IL 61108
Hauler Name Hauler Address

S.W.H. Registration Number 0070002
25 31

8153970289
Phone Number

ILD053219259
EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

Phone Number

EPA Number

AMERICAN CHEMICAL

319 S. Colfax

91808902

(Facility Name)

Address

39 Site Number 46

GRIFFITH,

IND

46319

2137683400

IND016360265

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39 Site Number 46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Organic Solvent

WASTE PHASE: Liquid

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

N O S Solvent Waste

Flammable

u n1 993
UN or NA Number

F 0 0 5
EPA HW Number

WEIGHT FOR
D.O.T. USE

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 2000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS _____)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Warren Friest
(Authorized Signature)

DATE: 12/15/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Rodney Mitchell
(Authorized Signature)

DATE: 12/15/82

(2) _____
(Authorized Signature)

DATE: 12/15/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 12/15/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

To 206 RT-50 6PM 12/15/82
002318

**TO BE COMPLETED BY
WASTE GENERATOR**

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0670645

Authorization Number 8 13

ACME SOLVENT RECLAIMING 1915 90th Avenue 815 397 0289 2010300025
(Company Name) Address Phone Number 14 Generator Number 24
Rockford, IL 61108 IL D053219259
City State Zip EPA Number

WASTE HAULER(S)

Acme Solvent Reclaiming **Rockford, IL 61108** S.W.H. Registration Number 0070002
Hauler Name Hauler Address 25 31
8153970289 IL D053219259
Phone Number EPA Number
Hauler Name Hauler Address S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL CO 319 S. Colfax 91808902
(Facility Name) Address 39 Site Number 40
GRIFFITH **IND** 46319 213 683-400 IND016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 Site Number 40
City State Zip Phone Number EPA Number

**TO BE COMPLETED BY
WASTE GENERATOR**

WASTE NAME: **Organic Solvent** WASTE PHASE: **Liquid**
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Solvent Waste NOS

Flammable

UN 1993
UN or NA Number

F 005
EPA HW Number

WEIGHT FOR D.O.T. USE LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 42 000 0 1 GALLONS (Circle One) 2 CU. YDS. 1
47 52 53

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

☒ TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Mike Pumilia
(Authorized Signature)

DATE: 12/29/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *Rodney Mitchell*
(Authorized Signature)

DATE: 12/29/82

(2) _____
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

(Authorized Signature)

DATE: 12/29/82

COMMENTS OR SPECIAL INSTRUCTIONS:

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

To 21027-50 GRM 12/29/82

002319

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
SPECIAL WASTE HAULING MANIFEST
WASTE GENERATOR

0165829
1 7

ALTON PACKAGING CORPORATION
(Company Name)

6550 South LAVERGNE Avenue
Address

FEDERAL ILD 006322929
0316000378
14 Generator Number 24

CHICAGO
City

ILLINOIS
State

60638
Zip

WASTE HAULER(S)

(1) AMERICAN CHEMICAL SERVICE
Hauler Name

420 South COLFAX
Hauler Address

S.W.H. Registration Number 0024002
25 31

(2) ~~AMERICAN CHEMICAL SERVICE~~
Hauler Name

~~420 South COLFAX~~
Hauler Address

S.W.H. Registration Number 0024002
32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE
(Facility Name)

420 South COLFAX
Address

91808902
39 Site Number 46

GRIFFITH
City

INDIANA
State

46319
Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: INK SOLVENTS

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

55 GAL. DRUMS

FLAMMABLE

42 DRUMS 16800 WEIGHT

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: JAN. 27, 1982

(Authorized Signature)

WASTE HAULER*

QUANTITY OF WASTE RECEIVED: 1680 Gal.

1 GALLONS (Circle One)
2 CO. TDS. 1

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER VAN (Specify)

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *[Signature]*
(Authorized Signature)

DATE: 1/27/82

(2) _____
(Authorized Signature)

DATE: ____/____/____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED:

(Authorized Signature)

DATE: 1/23/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

On deck 1/28/82 GEM

To 204 1/29/82 GEM T-50 002320

COMPLETED BY
GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0283762

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997755

ALTON PACKAGING CORPORATION

6550 South LAVERGNE Ave.

FEDERAL ILD 006322929

(Company Name)

Address

0316000378

CHICAGO

ILLINOIS

60638

14

Generator Number

24

City

State

Zip

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICE

420 South COLFAX

S.W.H. Registration Number 0024002

Hauler Name

Hauler Address

25

31

LANDGREBE MOTOR TRANSPORT

RTE. 130 VALPARAISO, INDIANA

ILLINOIS CC4649-MCR

S.W.H. Registration Number 0024002

Hauler Name

Hauler Address

32

38

009842824

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

420 South COLFAX

91808902

(Facility Name)

Address

39

Site Number

46

GRIFFITH

INDIANA

46319

City

State

Zip

IND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: INK SOLVENTS

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

55 GAL. DRUMS (16)

FLAMMABLE

WEIGHT FOR
D.O.T. USE 5120

LBS.
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 640

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: MAR 15, 82

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 3/15/82

(2) (Authorized Signature)

DATE: 3/16/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 3/16/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

On dock 3/10/82
To 112F T-63 6RM 3/23/82

SITE COPY - PART 3

002321

ETED BY
GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0283763

Authorization Number ~~119~~ 9 7 7 5 5

ALTON PACKAGING CORPORATION 6550 South LAVERGNE Ave FEDERAL ILD 0 0 6 3 22 9 2 9
(Company Name) Address
CHICAGO ILLINOIS 60638
City State Zip
Generator Number 0 3 1 6 0 0 0 3 7 8

AMERICAN CHEMICAL SERVICE 420 South Colfax
Hauler Name Hauler Address
LANDGREBE MOTOR TRANSPORT RTE. 130 VALPARAISO, INDIANA-
Hauler Name Hauler Address
S.W.H. Registration Number 0 0 2 4 0 0 2
ILLINOIS C C 4 6 4 9 - M C R ICC
0 0 9 8 4 2 8 2 4

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE 420 South Colfax 9 1 8 0 8 9 0 2
(Facility Name) Address
GRIFFITH INDIANA 46319
City State Zip
Site Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: INK SOLVENTS

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

55-GAL. DRUMS (12)

FLAMMABLE

WEIGHT FOR
D.O.T. USE

4500

LBS

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED:

600

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify) SEMI-VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION,
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: APRIL 7, 1982

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
INDICATED:

(1) (Authorized Signature)

DATE: 4 7 82

(2) (Authorized Signature)

DATE: 4 7 82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 4 18 82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

On dock 4.8.82 GRM To 112R SITE COPY - PART 3
T-63 GRM 4.14.82

002322

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

0283764

COMPLETED BY
WASTE GENERATOR

997755
Authorization Number 997755

ALTON PACKAGING CORPORATION
(Company Name)

6550 South LAVERGNE Ave.
Address

FEDERAL ID 006322929
0316000378

CHICAGO

ILLINOIS

60638

City

State

Zip

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICE
Hauler Name

420 South COLFAX
Hauler Address

S.W.H. Registration Number 0024002
25

LANDGREBE MOTOR TRANSPORT
Hauler Name

RTE. 130 VALPARAISO, INDIANA
Hauler Address

ILLINOIS CC4649 - MCR I.C.C.
S.W.H. Registration Number 0024002
32

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE
(Facility Name)

420 South COLFAX
Address

GRIFFITH

INDIANA

46319

City

State

Zip

2199244370
91808902
39 Site Number 46

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: INK SOLVENTS

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

55 GAL. DRUMS (31)

FLAMMABLE

WEIGHT FOR D.O.T. USE 6300
LBS. (circle one) TONS

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 200

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION,
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4-29-82

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
INDICATED:

(1) *[Signature]*
(Authorized Signature)

DATE: 4/29/82

(2) *[Signature]*
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

DATE: 4/30/82

COMMENTS OR SPECIAL INSTRUCTIONS:

ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

TRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

On dock 4-30-82 GRM

70112R T-63 GRM 5-3-82

SITE COPY - PART 3

002323

COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0283765

SPECIAL WASTE HAULING MANIFEST

Authorization Number 997755

ALTON PACKAGING CORPORATION

(Company Name)

6550 South LAVERGNE Ave.

Address

FEDERAL ILD 006322929

CHICAGO

City

ILLINOIS

State

60638

Zip

0316000378

Generator Number

AMERICAN CHEMICAL SERVICE

Hauler Name

420 South COLFAX

Hauler Address

S.W.H. Registration Number 0024002

LANDGREBE MOTOR TRANSPORT

Hauler Name

RTE. 130 VALPARAISO, INDIANA

Hauler Address

ILLINOIS CC4649-MCR

-I.C.C.-

S.W.H. Registration Number 0024002

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

(Facility Name)

420 South COLFAX

Address

91808902

Site Number

GRIFFITH

City

INDIANA

State

46319

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: INK SOLVENTS

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

55 GAL. DRUMS (13)

FLAMMABLE

WEIGHT FOR
D.O.T. USE 5850

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 5.85

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE

5/28/82

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)

(Authorized Signature)

DATE: 5/28/82

(2)

(Authorized Signature)

DATE: 5/28/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 6/1/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

On dock 5:18 6 PM
TO 210K T-50 6 PM 6-3-82

SITE COPY - PART 3

002324

LETED BY
GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0283766

Authorization Number 000000

ALTON PACKAGING CORPORATION (Company Name) 6550 South LAVERGNE Ave. Address FEDERAL ID 006322929
CHICAGO City ILLINOIS State 60638 Zip 0316000378 Generator Number 14 249

AMERICAN CHEMICAL SERVICE Hauler Name 420 South COLFAX Hauler Address WASTE HAULER(S) 312 943 3121 S.W.H. Registration Number 0024002 31
LANDGREBE MTR. TRANSPORT Hauler Name RTE. 130 VALPARAISO, INDIANA Hauler Address ILLINOIS 60469 I.C.C. 0024002 38
009842824 S.W.H. Registration Number 32

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE (Facility Name) 420 South COLFAX Address 91808902 Site Number 46
GRIFFITH City INDIANA State 46319 Zip INDIANA 46319

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: INK SOLVENTS WASTE PHASE: LIQUID (Liquid, Gaseous, Solid)

FOO3 UN1993

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

55 Gal. Drums (20) 20

FLAMMABLE

WEIGHT FOR D.O.T. USE 8000 LBS. (circle one) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 8000

1 GALLONS (circle one) CU YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: July

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 7/15/82

(2) (Authorized Signature)

DATE: 7/16/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 7/16/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

TO 210K TSO 6RM 7/16/82

SITE COPY - PART 3

002325

ATED BY
NERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0283767

Authorization Number 0000000000

ALTON PACKAGING CORPORATION 6550 South LAVERGNE Ave. FEDERAL ID 006322929
(Company Name) Address
CHICAGO ILLINOIS 60638
City State Zip
Generator Number 0316000378

AMERICAN CHEMICAL SERVICE 420 South COLFAX
Hauler Name Hauler Address
LANDGREBE MTR. TRANSPORT RTE. 130 VALPARAISO, INDIANA
Hauler Name Hauler Address
S.W.H. Registration Number 0024002
ILLINOIS CC 4649-MCR I.C.C.
S.W.H. Registration Number 0024002

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE
AMERICAN CHEMICAL SERVICE 420 South COLFAX
(Facility Name) Address
GRIFFITH INDIANA 46319
City State Zip
Site Number 91808902
IN 0016360065

TO BE COMPLETED BY
WASTE GENERATOR
WASTE NAME: INK SOLVENTS
WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:
SHIPPING DESCRIPTION: 55 Gal. Drums (13) HAZARD CLASS: Flammable
WEIGHT FOR D.O.T. USE 5200 LB9 TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.
QUANTITY OF WASTE DELIVERED: 5200
METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify) VAN
1 GALLONS (Circle One)
2 CU. YDS.

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION,
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION
DATE: Aug 17, 1982
(Authorized Signature)

WASTE HAULER
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
INDICATED:
(1) Landgrebe-Burg (13)
(Authorized Signature)
DATE: 8/17/82
(2) (Authorized Signature)
DATE: 8/18/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*
HAZARDOUS WASTE SUBJECT TO FEE YES NO X
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:
7 Duffee
(Authorized Signature)
DATE: 8/18/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

TO 210 F-T-50 GPM 8/18/82

SITE COPY - PART 3

002326

ATED BY
ERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0283768

PHONE:- 312 563 4953

Authorization Number 8 13

ALTON PACKAGING CORPORATION
(Company Name)

6550 South LAVERGNE Ave.
Address

FEDERAL ILD 006322929
0316000378
14 Generator Number 24

CHICAGO
City

ILLINOIS
State

60638
Zip

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICE
Hauler Name

420 South COLFAX
Hauler Address

S.W.H. Registration Number 0024002
25 31

PHONE:- 312 842 3121

LANDGREBE MTR. TRANSPORT
Hauler Name

RTE. 130 VALPARAISO, INDIANA
Hauler Address

ILLINOIS CC 4649-MCR I.C.C.
S.W.H. Registration Number 0024002
32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

PHONE:- 312 788 3400

AMERICAN CHEMICAL SERVICE
(Facility Name)

420 South COLFAX
Address

91808902
39 Site Number 46

GRIFFITH
City

INDIANA
State

46319
Zip

IND 016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: INK SOLVENTS

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

F003 UN1993

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

55 Gal. Drums (9)

Flammable

WEIGHT FOR D.O.T. USE 3600 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 360
47 52

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION.

DATE: 9-7-82

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 9/7/82
54 59

(2) (Authorized Signature)

DATE: 9/7/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 9/8/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

On dock 9.8.82
To 204 RT-50 6PM

SITE COPY - PART 3

002327

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0283769

TO BE COMPLETED BY
WASTE GENERATOR

PHONE: -312 563 4953

SPECIAL WASTE HAULING MANIFEST

Authorization Number 8 13

ALTON PACKAGING CORP.

(Company Name)

6550 South LAVERGNE Ave

Address

FEDERAL ILD 006322929

CHICAGO

City

ILLINOIS

State

60638

Zip

0316000378

Generator Number 24

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICE

Hauler Name

420 South COLFAX

Hauler Address

S.W.H. Registration Number 0024002

25

31

PHONE: -312 842 3121

LANDGREBE MTR. TRANSPORT

Hauler Name

RTE 130 VALPARAISO, INDIANA

Hauler Address

ILLINOIS CC 4649-MCR

I.C.C.

S.W.H. Registration Number 0024002

32

38

009842824

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

PHONE: -312 768 3400

AMERICAN CHEMICAL SERVICE

(Facility Name)

420 South COLFAX

Address

91808902

39

Site Number

46

GRIFFITH

City

INDIANA

State

46319

Zip

IND 016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: INK SOLVENTS

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

FOO3 UN1993

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

55 Gal. Drums (15).

Flammable

WEIGHT FOR
D.O.T. USE

7500

LBS.

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 750

47

52

1 GALLONS (Circle One).
2 CU. YDS.

53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION,
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10-13-82

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
INDICATED:

(1) *mtklls. Mullis*

(Authorized Signature)

DATE: 10/13/82

54

59

(2)

(Authorized Signature)

DATE: 11/1/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 10/14/82

59

65

COMMENTS OR SPECIAL INSTRUCTIONS:

217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

TO 204RT-50
GIRM - 10-14-82

SITE COPY - PART 3

002328

NOV. 18, 1982

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0283770

PHONE: - 312 563 4953

SPECIAL WASTE HAULING MANIFEST

Authorization Number 13

ALTON PACKAGING CORPORATION

6550 South LAVERGNE Ave. FEDERAL ILD 006322929

(Company Name)

Address

0316000378

G

CHICAGO

ILLINOIS

60638

Generator Number 24

City

State

Zip

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICE

420 South COLFAX

S.W.H. Registration Number 0024002

PHONE: - 312 842 3121

Hauler Address

25 31

LANDGREBE MTR. TRANSPORT

RTE. 130 VALPARAISO, INDIANA

ILLINOIS CC 4649 - MCR I.C.C.

Hauler Name

Hauler Address

009842824

S.W.H. Registration Number 0024002

32 38

PHONE: - 312 768 3400

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

420 South COLFAX

91808902

(Facility Name)

Address

39 46 Site Number

GRIFFITH

INDIANA

46319

IND. 016360265

City

State

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME INK SOLVENTS

WASTE PHASE LIQUID

(Liquid, Gaseous, Solid)

FO03 UN1993

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION

HAZARD CLASS

55 Gall Drums (12)

Flammable

WEIGHT FOR
D.O.T. USE

5400

LBS

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED

540

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION,
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE

11/18/82

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS
INDICATED.

(1)

(Authorized Signature)

DATE 11/18/82

(2)

(Authorized Signature)

DATE 11/18/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

(Authorized Signature)

DATE 11/19/82

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

HAULER COPY

PART 4

SITE COPY

T024RTSO

CAN 11/19/82

002329

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0283771

DEC. 27, 1982

SPECIAL WASTE HAULING MANIFEST

Authorization Number 8 13

PHONE:- 312 563 4953

ALTON PACKAGING CORPORATION
(Company Name)

6550 South LAVERGNE Ave.
Address

FEDERAL ILD 0 0 6 3 2 2 9 2 9

CHICAGO

City

ILLINOIS

State

60638

Zip

0 3 1 6 0 0 0 3 7 8
Generator Number

24

WASTE HAULER(S)

AMERICAN CHEMICAL SERVICE

Hauler Name

420 South COLFAX

Hauler Address

S.W.H. Registration Number 0 0 2 4 0 0 2

31

PHONE:- 312 842 3121

LANDGREBE MTR. TRANSPORT
Hauler Name

RTE. 130 VALPARAISO, INDIANA
Hauler Address

ILLINOIS C C 4 6 4 9 - MCR I.C.C.

S.W.H. Registration Number 0 0 2 4 0 0 2

38

0 0 9 8 4 2 8 2 4

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

PHONE:- 312 768 3400

AMERICAN CHEMICAL SERVICE
(Facility Name)

420 South COLFAX

Address

9 1 8 0 8 9 0 2

Site Number

46

GRIFFITH

City

INDIANA

State

46319

Zip

IND. 0 1 6 3 6 0 2 6 5

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: INK SOLVENTS

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

FO03 UN1993

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

55 Gal. Drums (20)

Flammable

WEIGHT FOR D.O.T. USE 10800 LBS •
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 1080

1 GALLONS (Circle One).
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 12/27/82

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Landgrebe J. Ruck
(Authorized Signature)

DATE: 12/27/82

(2) _____
(Authorized Signature)

DATE: 1/1/83

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 12/28/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

TO 204KT-506PM 12-28-82

SITE COPY - PART 3

002330

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

HAZARDOUS WASTE MANIFEST FORM
Wisconsin Statutes 144
FORM 4400-66

MANIFEST NUMBER

A 52311

See reverse side, Copy 6, for instructions.

Please type or print clearly using ball point pen — press hard.

GENERATOR (SHIPPER) SECTION			3. COMMENTS/SPECIAL INSTRUCTIONS		
1. COMPANY NAME Amerace; Control Products Division		2. EPA IDENTIFICATION NO. WID006097968			
4. P.O. BOX OR STREET ADDRESS 1000 Hickory Street					
5. CITY, STATE, ZIP CODE Grafton, Wisconsin 53024		6. TELEPHONE NUMBER (414) 377-0800			
7. NUMBER & TYPE OF CONTAINER 1-55 gal. drum	8. GALLONS 55	9. WASTE NAME Waste Flammable Liquid	10. US DOT HAZARD CLASS Flammable Liquid	11. US DOT IDENTIFICATION NUMBER UN1993	12. PHYSICAL STATE (Enter number in box) 1. Solid 3. Mixture <input checked="" type="checkbox"/> 2. Liquid
					13. US EPA WASTE CODE F005
					14. SHIPPING WEIGHT (Pounds) 440
This is to certify that the information contained herein is true, accurate and complete and that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. Department of Transportation and the Wis. Department of Natural Resources or the U.S. Environmental Protection Agency.			15. AUTHORIZED SIGNATURE <i>John P. Bell</i>		16. NAME (Print) John P. Bell
					17. DATE SHIPPED M / D / Y / /

TRANSPORTER SECTION		
18. COMPANY NAME Southeastern Waste Treatment, Inc.		19. EPA IDENTIFICATION NO. CAD000222083
20. P.O. BOX OR STREET ADDRESS P. O. Box 1697, 1015 New South Harris Street		
21. CITY, STATE, ZIP CODE Dalton, Georgia 30720		22. TELEPHONE NUMBER (404) 278-0091
23. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
24. AUTHORIZED SIGNATURE <i>Steve Owenby</i>	25. NAME (Print) Steve Owenby	26. Date Accepted 5/19/82
I hereby certify that the above named materials and indicated quantity(ies) has (have) been accepted in proper condition for transportation and I acknowledge that delivery shall be made to the facility designated as Hazardous Waste Facility.		
27. 2nd. TRANSPORTER COMPANY NAME South Eastern waste		28. EPA IDENTIFICATION NO.
29. AUTHORIZED SIGNATURE	30. NAME (Print)	31. Date Accepted M / D / Y

HAZARDOUS WASTE FACILITY SECTION		
32. FACILITY NAME American Chemical Services		33. EPA IDENTIFICATION NO. IND016360265
34. P.O. BOX OR STREET ADDRESS 420 South Colfax Avenue		
35. CITY, STATE, ZIP CODE Griffith, Indiana 46319		36. TELEPHONE NUMBER (219) 924-4370
37. COMMENTS		
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
38. AUTHORIZED SIGNATURE <i>Alvin Whitaker</i>	39. NAME (Print) Alvin Whitaker	40. Date Accepted 5/15/82
I hereby certify that the above named materials and indicated quantity(ies) has (have) been received and accepted.		
41. ALTERNATE HAZARDOUS WASTE FACILITY NAME		42. EPA IDENTIFICATION NO.
43. AUTHORIZED SIGNATURE	44. NAME (Print)	45. Date Accepted M / D / Y

46. MAIL TO:
Department of Natural Resources
Bureau of Solid Waste Management
Box 8094
Madison, Wisconsin 53707

47. Emergency 24 Hour Assistance Telephone Number
In Wisconsin (608-266-3232)
Outside Wisconsin (800-424-8802)

FOR DNR USE ONLY

HAZARDOUS WASTE FACILITY

On dock
5.5.82 GAW

To 210 RT-50 GAW

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste (OTHER)

MI 0017657

IDENTIFICATION	Generator's Name AMERICAN AEROSOLS INC	Primary Transporter's Name MR. FRANK INC	Treatment, Storage or Disposal Facility AMERICAN CHEM. SERVICE
	Site Address 636 E. 40th Holland MI 49423	Transporter's Address 201 W. 155th South Holland ILL	Facility Address 420 S. Colfax Ave Griffith, IND 46319
	Phone Number (616) 392-7811	Phone Number (312) 596-3377	Phone Number (312) 768-3400
	Generator's Site EPA I.D. Number MI.D006020929	Transporter's EPA I.D. Number IL.D0069506160	Facility Site EPA I.D. Number IND0016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES	LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Weight or Volume	Units	Hazardous Waste Number
						No.	Type	Solid	Liquid	Gas	Sludge			
WASTE INFORMATION	1.	Waste solvent NOS	FLAMMABLE	NA1993	07	1	TR		X			005500 GAL		F003 E005
	2.	(Mixed solvent waste)										005500		
	3.													
	4.													
	5.													
	6.													

COMMENTS Include Safety precautions and special handling instructions.
 F.P. < 80°F; PH Approx 7.3; In case of spill seal of drains + accesses to lakes, rivers + ponds CALL 1-800-294-4706 AT ONCE. Explosion proof pumping ONLY.

TRANSPORTER COMPLETES	GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.		Generator Signature Paul W. Bazzani	Date Shipped MO. DAY YEAR 02/16/82
	HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.	Transporter Vehicle I.D. No. No. 1 0079021	Transporter Signature Robert Beckins	Date(s) Received 02/16/82
		Subsequent Transporter Vehicle I.D. No's	Subsequent transporter(s) signature(s)	

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES	TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.	TSDF Signature B. B. Mauck	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Rejected	Date Received 02/16/82
		Facility Site EPA I.D. Number IND0016360265		

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800-294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800-424-8802

TSDF COPY To 210 K T-50 6PM 2/16/82

002332

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste (OTHER)

MI 0017655

IDENTIFICATION	Generator's Name AMERICAN AEROSOLS, INC	Primary Transporter's Name MR. FRANK INC.	Treatment, Storage or Disposal Facility AMERICAN CHEMICAL SERVICE
	Site Address 636 E. 40th Holland, MI 49423	Transporters Address 201 W. 155th South Holland, ILL	Facility Address 420 S. Colfax Griffith, IND
	Phone Number (616) 392-7811	Phone Number (312) 596-3377	Phone Number (312) 768-3400
	Generator's Site EPA I.D. Number MI D006020929	Transporter's EPA I.D. Number IL 0069506160	Facility Site EPA I.D. Number IN D016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES	LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Weight or Volume	Units	Hazardous Waste Number
						No.	Type	Solid	Liquid	Gas	Sludge			
WASTE INFORMATION	1.	1,1,1 - Trichloroethane	ORM-A	UN2831	A	18	DR	X				0.00972	GAL	F002
	2.	Methylene Chloride	ORM-A	UN1593	A	48	DR	X				0.02592	GAL	F002
	3.	Perchlor ethylene	ORM-A	UN1897	A	1	DR	X				0.00054	GAL	F002
	4.													
	5.													
	6.													

COMMENTS	Include Safety precautions and special handling instructions. Chlorinated solvent for recovery. Explosion proof pumping only	IN CASE OF SPILL CALL 1-800-294-4706
----------	--	---

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.	Generator Signature PW Boesenecker	Date Shipped MO. DAY YEAR 04.06.82
---	--	---

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.	Transporter Vehicle I.D. No. No. 1 0079015	Transporter Signature Robert R. [Signature]	Date(s) Received 04.06.82
Subsequent Transporter Vehicle I.D. No's		Subsequent transporter(s) signature(s)	

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.	TSDF Signature Ray [Signature]	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Rejected	Date Received 4.6.82
Facility Site EPA I.D. Number IN D016360265			

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800-294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800-424-8802

48 To 213 S-H T-63 GRM 4.12.82

19 To 210 T-SO GRM 4.12.82

TSDF COPY On dock 4.6.82 GRM

655200

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste (OTHER)

MI 0017663

IDENTIFICATION	Generator's Name AMERICAN AEROSOLS INC	Primary Transporter's Name MR FRANK INC	Treatment, Storage or Disposal Facility AMERICAN CHEM. SERVICE
	Site Address 636 E. 40th St. Holland MI 49423	Transporter's Address 201 W. 155th South Holland IL	Facility Address 420 S. COLFAX Griffith IND
	Phone Number (616) 392-7811	Phone Number (312) 596-3377	Phone Number (312) 768-3400
	Generator's Site EPA I.D. Number MI D006020929	Transporter's EPA I.D. Number IL D069506160	Facility Site EPA I.D. Number IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES	LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Weight or Volume	Units	Hazardous Waste Number
						No.	Type	Solid	Liquid	Gas	Sludge			
WASTE INFORMATION	1.	Methylene Chloride	ORM-A	UN1593	09	41	DR		x			002255	GAL	F002
	2.	Perchloroethylene	ORM-A	UN1897	09	0	DR		x			000000	GAL	F002
	3.	1,1,1-Trichloroethane	ORM-A	UN2831	09	15	DR		x			000825	GAL	F002
	4.	Trichloroethylene	ORM-A	UN1710	09	4	DR		x			000220	GAL	F002
	5.													
	6.													

Include Safety precautions and special handling instructions.

Chlorinated Solvent for recovery
Explosion proof pumping only

IN CASE OF SPILL CALL
1-800-294-4706

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature

① Paul W. Boesen

Date Shipped

MO. DAY YEAR

08/18/82

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No.

No. 1 0079013

Subsequent Transporter Vehicle I.D. No's

Transporter Signature

② Michael D. Martin

Subsequent transporter(s) signature(s)

Date(s) Received

08/18/82

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature

③ [Signature]

Facility Site EPA I.D. Number

IND016360265

☒ Accepted☐ Rejected

Date Received

8/18/82

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800-294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800-424-8802

On dock 8.18.82 6PM

TSDF COPY

15

TO 202 T-50 6PM 8/19/82
41 TO 1192 T-63 6PM 8/24/82

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0383497

Authorization Number 9 9 7 0 2 4
8 13

AMERICAN DECAL & MFG. CO. 4100 W. FULLERTON AVENUE

(Company Name)

Address

CHICAGO

ILLINOIS

60639

City

State

Zip

IL DO 0 5 4 3 4 7 3 6

14

Generator Number

24

0 3 1 6 0 0 0 2 8 1

WASTE HAULER(S)

STRAND TRUCKING

Hauler Name

Hauler Address

S.W.H. Registration Number 0 0 2 4 0 0 1
25 31

ILT 0 0 0 6 4 6 8 1 0

% AMERICAN CHEMICAL

PO BOX 190, GRIFFITH, IND.

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE 420 SO. COLFAX

(Facility Name)

Address

GRIFFITH

INDIANA

46319

City

State

Zip

9 1 8 0 8 9 0 2

39

Site Number

46

IND 0 1 6 3 6 0 2 6 5

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS F005

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

FLAMMABLE LIQUID NOS

WEIGHT FOR D.O.T. USE 8200 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 1200

47

1 GALLONS (Circle One)
2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 1/5/82

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 1/10/82 59

(2) (Authorized Signature)

DATE: 1/1/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 1/5/82 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

Ondock 1/5/82 GRM

To 124.R T-63 6004 1/6/82

SITE COPY - PART 3

002335

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0383498
1 7

9 9 7 0 2 4
Authorization Number 8 13

AMERICAN DECAL & MFG. CO. 4100 W. FULLERTON AVENUE

0 3 1 6 0 0 0 2 8 1
14 Generator Number 24

(Company Name)
CHICAGO
City

Address
ILLINOIS 60639
State Zip

STRAND TRUCKING

Hauler Name

WASTE HAULER(S)

Hauler Address

S.W.H. Registration Number 0 0 2 4 0 0 2
23 31

ILT 0 0 0 6 4 6 8 1 0

% AMERICAN CHEMICAL

Hauler Name

PO BOX 190, GRIFFITH, IND.

Hauler Address

S.W.H. Registration Number ~~XXXXXXXXXX~~
32 38

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE 420 SO. COLFAX

(Facility Name)

Address

9 1 8 0 8 9 0 2
39 Site Number 46

GRIFFITH

City

INDIANA

State

46319

Zip

IND 0 1 6 3 6 0 2 6 5

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS F005

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

FLAMMABLE LIQUID NOS

WEIGHT FOR D.O.T. USE 10.000 LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 1320 yds
47 52

1 GALLONS (Circle One)
2 CU. YDS. 1
53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3-12-82

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1)

(Authorized Signature)

DATE: 03 12 82
54 59

(2)

(Authorized Signature)

DATE: 1 1 1

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 3 15 82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

On dock 3:15:82 6PM
TO 125 R T-63 6PM 3/11/82

SITE COPY PART 3
002036

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0383499
1 7

SPECIAL WASTE HAULING MANIFEST

AMERICAN DECAL & MFG. CO.

4100 W. FULLERTON AVE.

(Company Name)

Address

CHICAGO

ILLINOIS

60639

City

State

Zip

Authorization Number 9 9 7 0 2 4
8 13
0 3 1 6 0 0 0 2 8 1 G
14 24
Generator Number

STRAND TRUCKING

WASTE HAULER(S)

Hauler Name

Hauler Address

S.W.H. Registration Number 0 0 2 4 0 0 2
25 31
ILT 000 646 810

% AMERICAN CHEMICAL P.OBOX 190, GRIFFITH, INDIANA

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE

420 SO. COLFAX

(Facility Name)

Address

9 1 8 0 8 9 0 2
39 46
Site Number

GRIFFITH

INDIANA

46319

IND 016 360 265

City

State

Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS F005

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

FLAMMABLE LIQUID NOS

WEIGHT FOR D.O.T. USE LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 1650

1 GALLONS (Circle One)
2 CU. YDS. 1
53

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 4-28-82

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) (Authorized Signature)

DATE: 4 28 82
54 59

(2) (Authorized Signature)

DATE: 1 1 1

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 4 28 82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

On dock 4-28-82 GRM
To 125 R T-63 GRM \$-3.82

SITE COPY - PART 3
002337

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0635603

Authorization Number 9 9 7 0 2 4
8 13

AMERICAN DECAL & MFG. 4100 W. FULLERTON 312 4 8 9 4 7 00 0 3 1 6 0 0 0 2 8 1
(Company Name) Address Phone Number 14 Generator Number 24
CHICAGO ILL 60639 2 1 7 7 8 2 6 7 6 0
City State Zip EPA Number

WASTE HAULER(S)

STRAND TRUCKING % AMERICAN CHEMICAL, P.O. Box 190 S.W.H. Registration Number 0 0 2 4 0 0 1
Hauler Name Hauler Address 25 31
GRIFFITH, INDIANA 312 355 5440 I L T 0 0 6 4 6 8 1 0
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV. P. O. BOX 190 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 46
GRIFFITH INDIANA 46319 312 268 3400 IND 016 360 265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS F005

WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

FLAMMABLE LIQUID NOS

NA 1993
UN or NA Number

F003
EPA HW Number

WEIGHT FOR D.O.T. USE 9100 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 1100 47 52 1 GALLONS (Circle One) 2 CU. YDS. 1
METHOD OF SHIPMENT (Circle One) (DRUMS 20) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN
Number

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Leonard M. Strand
(Authorized Signature)

DATE: 6/4/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) *Leonard M. Strand*
(Authorized Signature)
(2) _____
(Authorized Signature)

DATE: 6/4/82 54 59
DATE: 1/1/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO ☒

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael E. Buge
(Authorized Signature)

DATE: 6/4/82 60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

REV. # 4

SITE COPY - PART 3

On dock 6.4.82 612M
To 125 E T-63 612M 6.7.82 002338

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0635604

Authorization Number 8 13

AMERICAN DECAL & MFG. 4100 W. FULLERTON 312 4894700-0316000281
(Company Name) Address Phone Number 14 Generator Number 24
CHICAGO ILLINOIS 60639 2177826760
City State Zip EPA Number

WASTE HAULER(S)

STRAND TRUCKING % AMERICAN CHEMICAL P.O. BOX 190
Hauler Name Address
GRIFFITH, INDIANA 312 23858440 I L T 000646810
Phone Number EPA Number

Hauler Name Hauler Address
Phone Number EPA Number

DESTINATION -- DISPOSAL STORAGE OR TREATMENT SITE
AMERICAN CHEMICAL SERV. P. O. BOX 190 91808902
(Facility Name) Address 39 Site Number 46
GRIFFITH INDIANA 46319 312 768 3400 IND 016 360 265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS F005 WASTE PHASE: LIQUID
THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid Gaseous Solid)
SHIPPING DESCRIPTION: HAZARD CLASS: 1993
FLAMMABLE LIQUID NOS UN or NA Number EPA HW Number F005

WEIGHT FOR D.O.T. USE LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 1270 1 GALLONS (Circle One) 2 CU. YDS. 53
METHOD OF SHIPMENT (Circle One) (DRUMS 22) TANK TRUCK OPEN TRUCK OTHER (Specify) VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.
I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION DATE: 7-15-82
(Authorized Signature)

WASTE HAULER I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:
(1) (Authorized Signature) DATE: 7/15/82
(2) (Authorized Signature) DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY* HAZARDOUS WASTE SUBJECT TO FEE YES NO X
I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:
(Authorized Signature) DATE: 7/15/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637 *24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS* OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675
DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR
REV. # 4

SITE COPY - PART 3

TO 124RT-63 6PM 7/15/82 002339

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0635605

Authorization Number 8 13

AMERICAN DECAL & MFG. 4100 W. FULLERTON 312 489 4700

0 3 1 6 0 0 0 2 8 1

(Company Name)

Address

Phone Number

14

Generator Number

6

CHICAGO

ILLINOIS 60639

2 1 7 7 8 2 6 7 6 0

City

State

Zip

EPA Number

WASTE HAULER(S)

STRAND TRUCKING % AMERICAN CHEMICAL, P. O. BOX 190

S.W.H. Registration Number 0 0 2 4 0 0 1

Hauler Name

Hauler Address

GRIFFITH, INDIANA

3 1 2 3 8 5 8 4 4 0

I L T 0 0 0 6 4 6 8 1 0

Phone Number

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV. P.O. BOX 190

9 1 8 0 8 9 0 2

(Facility Name)

Address

39

Site Number

46

GRIFFITH

INDIANA

46319

312 768 3400

IND 016 360 265

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39

Site Number

46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR.

WASTE NAME: PAINT SOLVENTS F005

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

FLAMMABLE LIQUID NOS

UN or NA Number

EPA HW Number

WEIGHT FOR
D.O.T. USE

7 700

LBS

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 0 0 0 9 9 3

47

52

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS)

18

Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 8-17-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Stan Strand

(Authorized Signature)

DATE: 8/12/82

(2)

(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 8/12/82

COMMENTS OR SPECIAL INSTRUCTIONS:

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

To 12677-6361/41 8/12/82

002340

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0383500
1 7

Authorization Number 8 13

AMERICAN DECAL & MFG. 4100 W. FULLERTON 312 489 4700

(Company Name)
AXXX CHICAGO
City

Address
ILLINOIS 60639
State Zip

0 3 1 6 0 0 0 2 8 1
14 24
2 1 7 7 8 2 6 7 6 0

WASTE HAULER(S)
STRAND TRUCKING % AMERICAN CHEMICAL, P.O. BOX 190

Hauler Name
GRIFFITH, INDIANA 312 385 8440

S.W.H. Registration Number 0 0 2 4 0 0 2
25 31
ILT 0 0 0 6 4 6 8 1 0

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV. P.O. BOX 190

(Facility Name)

Address

9 1 8 0 8 9 0 2
39 46

GRIFFITH

INDIANA

46319 312 768 3400

City

State

Zip

IND 016 360 265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: **PAINT SOLVENTS F005**

WASTE PHASE: **LIQUID**

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

55 Gal. DRUMS

FLAMMABLE LIQUID NOS

WEIGHT FOR D.O.T. USE **8,550** LBS
TONS (circle one)

UN 1993

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: **00.1045**

1 **GALLONS** (Circle One)
2 CU. YDS.
53

METHOD OF SHIPMENT (Circle One)

19 DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: **9-29-82**

Robert D. Mince
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) **Chris Butler**
(Authorized Signature)

DATE: **9/29/82**
54 59

(2) _____
(Authorized Signature)

DATE: ____/____/____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO _____

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: ____/____/____
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

TO 125 K 7-63 6PM 9.29.82

SITE COPY - PART 3

002341

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0713502

Authorization Number 8 13

AMERICAN DECAL & MFG. CO. 4100 W. FULLERTON 312 489 4700

0 3 1 6 0 0 0 2 8 1 G

(Company Name)

Address

Phone Number

14

Generator Number

24

CHICAGO

ILLINOIS

60639

2 1 7 7 8 2 6 7 6 0

City

State

Zip

EPA Number

WASTE HAULER(S)

STRAND TRUCKING % AMERICAN CHEMICAL, P.O. BOX 190,

S.W.H. Registration Number 0 0 2 4 0 0 2

Hauler Name

Hauler Address

GRIFFITH, INDIANA

3 1 2 - 3 8 5 8 4 4 0

ILT 000646810

Phone Number

EPA Number

Hauler Name

Hauler Address

S.W.H. Registration Number 32 38

3 1 2 - 2 6 8 3 4 0 0

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV. P. O. BOX 190

9 1 8 0 8 9 0 2

(Facility Name)

Address

39

Site Number

46

GRIFFITH

INDIANA

46319

312 768 3400

IND 016 360 265

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39

Site Number

46

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: PAINT SOLVENTS F005

WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

(Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

55 GAL. DRUMS FLAMMABLE LIQUID NOS

UN 1993

UN or NA Number

F005

EPA HW Number

WEIGHT FOR
D.O.T. USE

9000

LBS

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 20 1 1 0 0

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS 20)

Number

TANK TRUCK

OPEN TRUCK

(OTHER (Specify)

VAN

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Robert D. Mues

(Authorized Signature)

DATE: 11-9-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Jim Butte

(Authorized Signature)

DATE: 11/9/82

(2) (Authorized Signature)

DATE: 11/9/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael A. Perry

(Authorized Signature)

DATE: 11/9/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

TO 125 RT-63 60M 11-9-82

002342

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0486562

Authorization Number 9 9 3 5 1 4
8 13

American Inks & Coatings 1540 W. Wrightwood (312) 543-6050 0 4 3 0 0 5 0 0 1 4 G
(Company Name) Address Phone Number 14 Generator Number 24
Addison Illinois 60101 I L D 0 7 4 3 7 2 2 5 1
City State Zip EPA Number

WASTE HAULER(S)

Landgrebe P.O. Box 32 Valpariso IND 46383 S.W.H. Registration Number I C C 2 9 8 0
Hauler Name Hauler Address 25 31
~~219-924-4370~~ I N D 0 0 9 8 4 2 8 2
Phone Number EPA Number
Hauler Name Hauler Address (219) 462-4181 S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemicals Service 420 S. Colfax 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 46
Griffith Indiana 46319 219-924-4370 I N D 0 1 6 3 6 0 2 6
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Organic Solvents WASTE PHASE: Liquid

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

Flammable Solvent Hazardous

U N 1 9 9 3
UN or NA Number

F 0 0 3
EPA HW Number

WEIGHT FOR D.O.T. USE 4192 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 4 9 5 1 GALLONS (Circle One) 2 CU. YDS.

METHOD OF SHIPMENT (Circle One) X (DRUMS 7) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION. IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 4-15-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED.

(1) (Authorized Signature)

DATE: 4/15/82

(2) (Authorized Signature)

DATE: 4/15/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 4/15/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

REV. # 3

SITE COPY - PART 3

TO 2107 T-50 6PM 4/16/82

002343

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0486563

Authorization Number 993514
8 13

American Inks & Coatings 1540 W. Wrightwood (812) 543-6050 04300500146
(Company Name) Address Phone Number 14 Generator Number 24

Addison Illinois 60101 ILD074372251
City State Zip EPA Number

WASTE HAULER(S)

Landgrebe P.O. Box 32 Valpariso, IND 46383 S.W.H. Registration Number ACC2980
Hauler Name Hauler Address 25 31

(219) 462-4181 IND009842824
Phone Number EPA Number

Hauler Name Hauler Address Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

American Chemicals Service 420 S. Colfax 91808902
(Facility Name) Address 39 Site Number 46

Griffith Indiana 46319 (219) 924-4380 IND016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 46

City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Organic Solvents WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Flammable Solvent Hazardous

UN1993
UN or NA Number

F003
EPA HW Number

WEIGHT FOR D.O.T. USE 5526 LBS
(circle one) TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 660 GALLONS (Circle One)
47 52 2 CU. YDS. 53

METHOD OF SHIPMENT (Circle One)

(DRUMS 12)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 8-11-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [Signature]
(Authorized Signature)

DATE: 8/11/82
54 59

(2) [Signature]
(Authorized Signature)

DATE: 8/12/82
54 59

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[Signature]
(Authorized Signature)

DATE: 8/12/82
54 59

COMMENTS OR SPECIAL INSTRUCTIONS:

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

IN ILLINOIS: 217 / 782-3637

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

To 210 R-7-50 GPM 8.12.82

002344

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0486564

Authorization Number 8 13

American Inks & Coatings 1540 W. Wrightwood 312-543-6050 0 4 3 0 0 5 0 0 1 4
(Company Name) Address Phone Number 14 Generator Number 24

Addison Illinois 60101 I L D 0 7 4 3 7 2 2 5 1
City State Zip EPA Number

WASTE HAULER(S)

Landgrebe P.O. Box 32 Valpariso IND 46383 S.W.H. Registration Number ACC 2 9 8 0
Hauler Name Hauler Address 25 31
219-462-4181 I N D 0 0 9 8 4 2 8 2 4
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number 32 38
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
American Chemicals Service 420 . Colfax 9 1 8 0 8 9 0 2
(Facility Name) Address 39 Site Number 40

Griffith Indiana 46319 219-924-4370 I N D 0 1 6 3 6 0 2 6 5
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address 39 Site Number 40
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: Organic Solvents

WASTE PHASE: Liquid

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Flammable Solvent Hazardous

U N 1 9 9 3
UN or NA Number

F 0 0 3
EPA HW Number

WEIGHT FOR D.O.T. USE 2738 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 330 47 52 53
1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS 6)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

(Authorized Signature)

DATE: 9-30-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(Authorized Signature)

DATE: 9/30/82 54 59

(2) (Authorized Signature)

DATE: 10/1/82 54 59

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 10/1/82 60 65

COMMENTS OR SPECIAL INSTRUCTIONS

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

TO 122 K T. 63 GPM 10.182 002345

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0345440

Authorization Number

748928

AMERICAN CHEMICAL SERVICE 2200 N. 1st St.
(Company Name) Address
SKOKIE IL 60077
City State Zip

Generator Number 6-12860032

MR FRANK 701 W. 1st St. South
Hauler Name Hauler Address HOLLAND

S.W.H. Registration Number 0079005

Fed. I.D. ILD 069506160

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE Box 190
(Facility Name) Address
G. LEITCH IND 46319
City State Zip

Site Number 9406902

Fed. I.D. IND 01636046

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: ORGANIC SOLVENTS

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

Flammable

1

WEIGHT FOR
D.O.T. USE

LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 3,000

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 11/25/80

FOOS

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Tom Berry
(Authorized Signature)

DATE: 11/25/80

(2)
(Authorized Signature)

DATE: 11/25/80

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 11/25/80

COMMENTS OR SPECIAL INSTRUCTIONS:

Rumped to 204TK 11-25-86

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

002346

TO BE COMPLETED BY
WASTE GENERATOR

STATE ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0261985

AMERICAN LOUVER CO. 7700 AUSTIN AVE
(Company Name) Address
SKOKIE IL 60077
City State Zip

Authorization Number 998928

ILD005094735

0312880032
Generator Number

LANDGREBE
Hauler Name

WASTE HAULER(S)

Hauler Address

S.W.H. Registration Number

IND009842824

S.W.H. Registration Number

Hauler Name

Hauler Address

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERV. 420 S COLEMAN AVE
(Facility Name) Address

91808902
Site Number

GRIFFITH IN 46319
City State Zip

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

FLAMMABLE LIQUID FLAMMABLE
N.O.S.

WEIGHT FOR D.O.T. USE 400 LBS
per Drum
52 drums
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 47 52

GALLONS (Circle One)
CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3/30/81

(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED

(1) (Authorized Signature)

DATE: 3/30/81

(2) (Authorized Signature)

DATE: 3/30/81

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 3/31/81

COMMENTS OR SPECIAL INSTRUCTIONS:

PUMPED TO 20TK T-50 4/2
PUMPED 8 DRUMS TO 20TK T-50 4/2

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3
002347

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0482343

Authorization Number 998928

AMERICAN BOURBON CO 7700 AUSTIN 312 470 3315 0312 880032
(Company Name) Address Phone Number Generator Number
SKOKIE IL 60077 ILD005094735
City State Zip EPA Number

WASTE HAULER(S)

MR FRANK, INC SO HOLLAND, IL 312 596 3377 ILD069506160
Hauler Name Hauler Address Phone Number EPA Number
S.W.H. Registration Number 0079/019

Hauler Name Hauler Address Phone Number EPA Number
S.W.H. Registration Number

AMERICAN CHEMICAL SERVICE 420 SO COL FAX 91803902
(Facility Name) Address Site Number
GRIFFITH, IN 46312 219 244370 IND016360265
City State Zip Phone Number EPA Number
Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME ORGANIC SOLVENTS WASTE PHASE LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

FLAMMABLE LIQUID UN1993 E005
DOT or NA Number EPA HW Number

WEIGHT FOR LBS WEIGHT FOR I.E.P.A. USE MUST BE QUANTITY OF WASTE DELIVERED: 004500 0 GALLONS (Circle One)
D.O.T. USE TONS (circle one) CONVERTED TO CU. YDS. OR GAL. CU. YDS.

METHOD OF SHIPMENT (Circle One) (DRUMS Number) TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Michael Gault
(Authorized Signature)

DATE: 8-5-81

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [Signature]
(Authorized Signature)
(2) [Signature]
(Authorized Signature)

DATE: 8-5-81
DATE:

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES 10

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Frank 8-5-81
(Authorized Signature) DATE

COMMENTS OR SPECIAL INSTRUCTIONS: TO 2032 T-50 8/5/81 gpm

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0345442

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998928

AMERICAN LOUVER CO. 7700 AUSTIN AVE
(Company Name) Address
SKOKIE ILL. 60077
City State Zip

0312880032
Generator Number

LANDGREBE VALPARAISO
MOTOR TRANSIT INDIANA
Hauler Name Hauler Address
PHONE # 219-421-0095
Hauler Name Hauler Address

S.W.H. Registration Number IND009842824

S.W.H. Registration Number IND009842824

AMERICAN CHEM. SERVICE INC PO. Box 190
(Facility Name) Address
GRIFFITH INDIANA 46319
City State Zip

91808902
Site Number

TND016360265

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS

WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: FLAMMABLE HAZARD CLASS: FLAMMABLE
LIQUID N.O.S.

UN-1993
F.005
400#/DRUM 5 Drums
WEIGHT FOR D.O.T. USE 400 LBS
(circle one)
TUNS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL

QUANTITY OF WASTE DELIVERED: 275 GAL 1 GALLONS (Circle One)
CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 2-4-82

E. H. Jacobson
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) L. M. Curt Shely
(Authorized Signature)
(2) L. M. Curt Shely
(Authorized Signature)

DATE: 2/5/82
DATE: 2/5/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Frank Price
(Authorized Signature)

DATE: 2/8/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

On dock 2/8/82 To 210 R
T-50 6PM SITE COPY - PART 3
002349

**TO BE COMPLETED BY
WASTE GENERATOR**

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760

0345441

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998928

AMERICAN LOUVER CO. 7700 AUSTIN AVE
(Company Name) Address
SKOKIE ILL. 60077
City State Zip

0312880032
Generator Number
TL0005094735

LANDGREBE VALDRAISE WASTE HAULER(S)
MITEE TRANSIT INDIANA
Hauler Name Hauler Address
PHONE # 219-721-0095
Hauler Name Hauler Address

S.W.H. Registration Number ICC2890
IND009842824
S.W.H. Registration Number

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEM. SERVICE P.O. Box 190
(Facility Name) Address
GRIFFITH INDIANA 46319
City State Zip

91808902
Site Number

**TO BE COMPLETED BY
WASTE GENERATOR**

WASTE NAME: WASTE SOLVENTS WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)
UN-1993 F. 005

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION: FLAMMABLE HAZARD CLASS: FLAMMABLE
LIQUID N.O.S.

WEIGHT FOR D.O.T. USE 400#/drum LBS
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 275 GAL.
1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One) DRUMS TANK TRUCK OPEN TRUCK OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3-5-82

E. H. Jacobson
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [Signature]
(Authorized Signature)
(2) _____
(Authorized Signature)

DATE: 3/5/82
DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[Signature]
(Authorized Signature)

DATE: 3/8/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 GENERATOR

TO 204 RT-506RM 3/8/82 SITE COPY - PART 3
002350

**TO BE COMPLETED BY
WASTE GENERATOR**

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0594443

Authorization Number 9 9 8 9 2 8
8 13

AMERICAN LOUVER 7700 AUSTIN 312 470 3300 0312880032
(Company Name) Address Phone Number 14 Generator Number 24
SKOKIE ILL. 60077 ILL 005094735
City State Zip EPA Number

WASTE HAULER(S)

LANDGREBE VALPARAISO IND
Hauler Name Hauler Address
MOTOR TRANSIT 219-721-0095
Phone Number
IND 009842824
EPA Number

S.W.H. Registration Number 25 31

S.W.H. Registration Number 32 38

AMERICAN CHEM. DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE
SERVICE INC. P.O. Box 190
(Facility Name) Address
GRIFFITH INDIANA 46319 312
City State Zip Phone Number
IND 0016360265
EPA Number

Alternate (Facility Name) Address 39 Site Number 46
City State Zip Phone Number EPA Number

**TO BE COMPLETED BY
WASTE GENERATOR**

WASTE NAME: WASTE SOLVENTS

WASTE PHASE: LIQUID

(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

FLAMMABLE
LIQUID N.O.S.

FLAMMABLE

UN 1993
UN or NA Number

F 005
EPA HW Number

WEIGHT FOR 400 DRUM 5 DRUMS
D.O.T. USE TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 275
47 52

2 GALLONS (Circle One)
CU. YDS. 53

METHOD OF SHIPMENT (Circle One)

(DRUMS 5)
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Bruce Melin's by
(Authorized Signature)

DATE: 4-1-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) Landgrebe Motor Transport
(Authorized Signature) James R. Rube
(2) _____
(Authorized Signature)

DATE: 4/1/82
34 59
DATE: 4/2/82
60 65

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ☐ NO ☒

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE.

Frank James Price
(Authorized Signature)

DATE: 4/2/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

TO 210 RT-50 6RM 4.2.82

002351

FOR HELP IN CHEMICAL EMERGENCIES INVOLVING SPILL, LEAK,
FIRE OR EXPOSURE CALL TOLL-FREE 1-800-424-9300 DAY OR NIGHT

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

Carriers No. 2000

(NAME OF CARRIER) /

SCAC _____ Date 7/2/74

(NAME OF CARRIER)

TO: Consignee <i>American Chemical</i>		FROM: Shipper <i>AMERICAN CAN COMPANY</i>	
Street <i>420 - 1st St</i>		Street <i>500 W. Highway, 31</i>	
Destination <i>Williston, N.D.</i> Zip <i>58854</i>		Origin <i>Antonia, N.D.</i> Zip <i>58002</i>	
Route: <i>LN0016360265</i>		Vehicle Number	

[illegible]

State: Zip:

COD Amt: \$

Collect ☐ \$

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

PREPAID	COLLECT
---------	---------

	<input type="checkbox"/>	<input type="checkbox"/>
--	--------------------------	--------------------------

RECEIVED, subject to the classifications and tariffs reflect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

SPECIAL INSTRUCTIONS:

PLACARDS REQUIRED

**PLACARDS
SUPPLIED**

☒ YES ☐ NO - FURNISHED BY CARRIER
DRIVERS SIGNATURE:

SHIPPER: AMERICAN CAN COMPANY

PER:

DATE:

CARRIER:

PER:

DATE:

To 210 K T-50 GRN

FOR HELP IN CHEMICAL EMERGENCIES INVOLVING SPILL, LEAK,
FIRE OR EXPOSURE CALL TOLL-FREE 1-800-424-9300 DAY OR NIGHT

1-800-424-9300-DAY
002352

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

533-0015

TO: T/S/D FACILITY <u>AMERICAN CHEMICAL SERVICE</u>		FROM: Generator <u>AMERICAN CAN CO</u>	
E.P.A. ID Code No. <u>INDO 16360265</u>		E.P.A. ID Code No. <u>IAD 001813327</u>	
Address <u>COLEMAN & RAILROAD AVE</u>		Address <u>1500 E. AURORA</u>	
Destination <u>GRIFFITH, INDIANA</u>		Origin <u>DES MOINES, IOWA 50306</u>	
Phone <u>219-924-4370</u>		Phone <u>515-265-2501</u>	

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz. Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
1	BULK TRUCK	FLAMMABLE	HA1993	D001	5000	FLAMMABLE
	WASTE SOLVENT N.O.S.	LIQUID		F003		LIQUID
				F005		

PLACARDS REQUIRED YES

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

FREIGHT CHARGES
PREPAID ☒ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

EMERGENCY RESPONSE INFORMATION

T/S/D FACILITY <u>RETURN TO GENERATOR</u>	CONTACT Name <u>CLIFF NETCHER/BOB WENNING</u>
E.P.A. ID Code No. _____	Phone <u>515-265-2501</u>
Address _____	National Response Center <u>1-800-424-8802</u>
Destination _____	in D. C. <u>426-2675</u>

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date 12/1/82

TRANSPORTER #1 MR FRANK, INC E.P.A. ID No. ILL 063506160
Address 201 W. 155TH ST
City SOUTH HOLLAND State ILL Zip 60473 Phone 312-596-3377

Transporter No. 1 Signature _____ Date 12/1/82
This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

Transporter No. 2 Signature _____ Date _____
This is to certify acceptance of the hazardous waste shipment.

TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY Signature _____ Date 12/1/82
This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D F COPY

TO 211KT-50

GPM 12-21-82

002353

FOR HELP IN CHEMICAL EMERGENCIES INVOLVING SPILL, LEAK,
FIRE OR EXPOSURE CALL TOLL-FREE 1-800-424-9300 DAY OR NIGHT

must be legibly filled in, in ink, in Indelible Pencil, or in Carbon, and retained by the Agent.

Carriers 141095

Date 8/30/82

Mr. Frank Industrial Disposal
(NAME OF CARRIER)

SCAC

TO: Consignee *Exerim Chemical Services*

FROM: Shipper : AMERICAN CAN COMPANY

Street 420 South Colfax

Street 2501-165th Lt.

Destination Griffith In Zip 91706

Origin Hammond La Zip 46320

Route: *Mr. Fink*

Vehicle Number	
----------------	--

[illegible]

City: _____ State: _____ Zip: _____

COD Amt: \$

Collect ☐ \$

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

\$	Per

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse to the consignor, the consignor shall sign the following statement

FREIGHT CHARGES	
PREPAID	COLLECT
<input type="checkbox"/>	<input type="checkbox"/>

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the properly described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

SPECIAL INSTRUCTIONS:

SHIPPER: AMERICAN CAN COMPANY

PER: *Kenneth S. Byrnes*
DATE: *8/2/83*

FORM # 8-BLS-C (4 PLY)

PLACARDS REQUIRED

**PLACARDS
SUPPLIED**☐ YES ☒ NO - FURNISHED BY CARRIER

DRIVERS SIGNATURE:

CARRIER:

PER:

DATE:

Agent must detach and retain this Shipping Order and must sign the Original Bill of Lading.

FOR HELP IN CHEMICAL EMERGENCIES INVOLVING SPILL, LEAK,
FIRE OR EXPOSURE CALL TOLL-FREE 1-800-424-9300 DAY OR NIGHT

002355

FOR HELP IN CHEMICAL EMERGENCIES INVOLVING SPILL, LEAK,
FIRE OR EXPOSURE CALL TOLL-FREE 1-800-424-9300 DAY OR NIGHT

ORIGINAL - NOT NEGOTIABLE

Carriers 176321

SCAC _____ Date 10-14-87

FROM: Shipper AMERICAN CAN COMPANY

Street 2501 - 165th Street

Origin Hammond, Indiana Zip 46320

Vehicle Number 49-238

1	X	Tankwagon (3100) Gallons Waste	Flammable Liquid	NA 1993		None
---	---	--------------------------------	------------------	---------	--	------

Solvent

29860

P.O. # 459212

Release # 32001028P

7/2/2020

COD Amt: \$

Collect ☐ \$

FREIGHT CHARGES
PREPAID COLLECT

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if or on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and to deliver to any party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

SPECIAL INSTRUCTIONS:

PLACARDS REQUIRED

**PLACARDS
SUPPLIED**

Flammable Liquid

☐ YES ☒ NO - FURNISHED BY CARRIER

CARRIER: MR. FRANK INC.

PER: F. M. O. X

DATE: 10-14-82

FORM # 8-BLS-C (4 PLY)

FOR HELP IN CHEMICAL EMERGENCIES INVOLVING SPILL, LEAK
FIRE OR EXPOSURE CALL TOLL-FREE 1-800-424-9300 DAY OR NIGHT

002356

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

06357773
994728
Authorization Number 8 13

AMERICAN CANCO 6017 SOWESTER 434-6100 0316000248
(Company Name) Address Phone Number Generator Number
CHICAGO ILL 60636 140074372517
City State Zip EPA Number

WASTE HAULER(S)

MR FRANKS INC 201 WEST 155 ST
Hauler Name Hauler Address
SOUTH HOLLAND ILL'S 3125963377
Phone Number
0079009
S.W.H. Registration Number 25 31
740069506160
EPA Number

Hauler Name Hauler Address
Phone Number EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AM CHEMICAL SERVICE INC PO. BOX 190
(Facility Name) Address
GRIFITH INDIANA 46319219924-4370INDO 16360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: WASTE SOLVENTS

WASTE PHASE: Liquid
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

FLAMMABLE

UN1993
UN or NA Number

F003
EPA HW Number

WEIGHT FOR
D.O.T. USE

LBS.
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 004500
47 52

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Authorized Signature

DATE: 5/26/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Tom Berry
(Authorized Signature)

DATE: 05/24/82
54 59

(2)
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

(Authorized Signature)

DATE: 5/26/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

IN ILLINOIS: 217 / 782-3637

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. 1

SITE COPY - PART 3

TO 210 RT-50 6PM 5-26-82

002357

**TO BE COMPLETED BY
WASTE GENERATOR**

STATE OF ILLINOIS
ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0705030

Authorization Number

920954

ONYX CHEMICAL CO. 14000 S. SEELEY (312) 371-2000 0310660001
(Company Name) Address Phone Number Generator Number
BLUE ISLAND ILLINOIS 60406
City State Zip EPA Number
ILD085343887

WASTE HAULER(S)

MR. FRANK 201 W. 155TH ST. S.W.H. Registration Number 0079015
Hauler Name Hauler Address
SO. HOLLAND, IL (312) 596-3377
City State Zip Phone Number EPA Number
ILD069506160

Hauler Name Hauler Address S.W.H. Registration Number
Phone Number EPA Number

AMERICAN CHEMICAL SERVICES 410 S. COLFAX AVE. 91808902
(Facility Name) Address Site Number
GRIFFITH INDIANA 317683100 INDP016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

**TO BE COMPLETED BY
WASTE GENERATOR**

WASTE NAME: OFF SPEC MEA & PARAFORMALDEHYDE WASTE PHASE: LIQUID

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW: (Liquid, Gaseous, Solid)

SHIPPING DESCRIPTION:

HAZARD CLASS:

PARAFORMALDEHYDE

DRM-A

UN2213
UN or NA Number

EPA HW Number

WEIGHT FOR 5680 LBS
D.O.T. USE TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 000660 1 GALLONS (Circle One)
2 CU. YDS. 1

METHOD OF SHIPMENT (Circle One)

(DRUMS 12) Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

FLATBED

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION.
IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Deyle Kelly
(Authorized Signature)

DATE: 12-17-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE
THE DESTINATION AS INDICATED:

(1) *Robert Reitano*
(Authorized Signature)

DATE: 12/17/82

(2) _____
(Authorized Signature)

DATE: 1/1/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

William Whitaker
(Authorized Signature)

DATE: 12/17/82

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

REV. # 4

SITE COPY - PART 3

On deck 12-17-82

002358

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

93081

TO: T/S/D FACILITY AMERICAN CHEMICAL SERVICE		FROM: Generator FORT WAYNE POOL EQUIPMENT	
E.P.A. ID Code No. INDO-16360265		E.P.A. ID Code No. INT-160014035	
Address 420 S. Colfax		Address 510 Sumpter Drive	
Destination Griffith Indiana		Origin Fort Wayne, Indiana	
Phone 219-924-4370		Phone 219-483-1365	

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz Mat. I.D. No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
2 DR	WASTE ACETONE	FLAMMABLE	UN-1090	U002	110 Gal	FLAMMABLE

PLACARDS REQUIRED **FLAMMABLE**

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignee, the consignee shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

FREIGHT CHARGES
PREPAID ☐ COLLECT ☐

(Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

EMERGENCY RESPONSE INFORMATION

T/S/D FACILITY _____	CONTACT Name _____
E.P.A. ID Code No. _____	Phone _____
Address _____	National Response Center 1-800-424-8802
Destination _____	in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 TECHAS SOLVENT COMPANY	E.P.A. ID No. MID-039993902
Address 5605 Planeview Drive	
City Fort Wayne	State IN Zip 46825 Phone 219-487-9638

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____	E.P.A. ID No. _____
Address _____	
City _____	State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY	To 1092 T-63 10/13/81
This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.	
T/S/D FACILITY Signature _____	Date _____

T/S/D F COPY

002359

HAZARDOUS WASTE MANIFEST

007182
MANIFEST DOCUMENT NUMBER

THOMAS SOLVENT COMPANY

SHIPPER NUMBER

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	EXEMPT	GARRETT TUBULAR PRODUCTS 802 E. King 219-357- Garrett, IN 4161	
TRANSPORTER # 1	MID039993902	THOMAS SOLVENT CO. 5605 Planeview Dr. Ft. Wayne, IN 219-482-9638	
TRANSPORTER # 2 (if required)			
TSDF TREATMENT STORAGE OR DIS- POSAL FACILITY	IND016360265	420 S. Colfax AMERICAN CHEMICAL SERVICE Griffith, IN 219-924-4370	7/14
TSDF TREATMENT STORAGE OR DIS- POSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	EPA HAZ WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
6 DRUMS	U-239	WASTE XYLENE	UN-1307	Flammable		55GALS DRUM	520 GALS.		

SPECIAL HANDLING INSTRUCTIONS

If an RQ commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes ☐ No ☐REMIT
C.O.D. TO:
ADDRESS

COD

Amt: \$

C.O.D. FEE:
PREPAID ☐
COLLECT ☐TOTAL
CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID
except when box at
right is checked ☐ Check box if charges
are to be collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

\$ _____ per _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

(Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (if required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDF SIGNATURE

DATE

5

HAZARDOUS WASTE MANIFEST

0042782
MANIFEST DOCUMENT NUMBER

THOMAS SOLVENT COMPANY

SHIPPER NUMBER

NAME OF CARRIER

(SCAC)

CARRIER NUMBER

IDENTIFICATION

	12 DIGIT EPA ID #	COMPANY NAME, MAILING ADDRESS, AND TELEPHONE NUMBER	DATE SHIPPED OR RECEIVED
GENERATOR/SHIPPER	EXEMPT	GARRETT TUBULAR PRODUCTS 802 E. King Garrett, IN	
TRANSPORTER # 1	MID039993902	THOMAS SOLVENT COMPANY 5605 Planeview Dr. Ft. Wayne, IN 219-482-9638	
TRANSPORTER # 2 (If required)			
TSDT TREATMENT STORAGE OR DISPOSAL FACILITY	IND01630265	AMERICAN CHEMICAL SERVICE 420 S. Colfax Griffith, IN 219-924-4370	
TSDT TREATMENT STORAGE OR DISPOSAL FACILITY			

WASTE INFORMATION

NO. OF UNITS & CONTAINER TYPE	EPA HAZ. WASTE ID #	DESCRIPTION AND CLASSIFICATION (Proper Shipping Name, Class and Identification Number per 172.101, 172.202, 172.203)	UN # or NA #	EXEMPTION OR NO LABELS REQUIRED	FLASH POINT (IN °C) WHEN REQ'D	UNITS WT/VOL	TOTAL QUANTITY	RATE	CHARGES (For Carrier Use Only)
2 DRUMS	U-239	WASTE XYLENE	UN-1307	FLAMMABLE		55 GAL. DRUM	110 GALS.		

SPECIAL HANDLING INSTRUCTIONS

If an RC commodity is spilled on a waterway or adjoining land, the incident must be promptly reported to the Federal government at 1-800-424-8802 (toll free) or 202-426-2675 (toll call). If other DOT Hazardous Materials are discharged creating a serious situation, call shipper's telephone number or Chemtrec 1-800-424-9300 immediately.

COMMENTS

On "Collect on Delivery" shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1

PLACARDS TENDERED

Yes ☐ No ☐REMIT
C.O.D. TO:
ADDRESS

COD

Amt: \$

C.O.D. FEE:
PREPAID ☐
COLLECT ☐ \$TOTAL
CHARGES: \$

FREIGHT CHARGES

FREIGHT PREPAID
except when box at
right is checked ☐ Check box if charges
are to be collect

Note—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding:

\$ _____ OR _____

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

Signature

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

(Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or

any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

CERTIFICATION

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the U.S. Environmental Protection Agency

This is to certify acceptance of the hazardous waste shipment.

TRANSPORTER #1 SIGNATURE & DATE

TRANSPORTER #2 SIGNATURE & DATE (If required)

This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

GENERATOR'S SIGNATURE

DATE

TSDT SIGNATURE

DATE

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste☐ Other

MI 0226376

IDENTIFICATION	Generator's Name Grand Rapids Osteopathic Hosp.	Primary Transporter's Name Valley City Refuse Disposal, Inc.	Treatment, Storage or Disposal Facility American Chemical Service, Inc.
	Generator's Address 1919 Boston Grand Rapids, MI 49506	Transporter's Address 2630 Thornwood Wyoming, MI 49509	Facility Address 420 S. Colfax Griffith, IN 46319
	Phone Number (616) 247-7015	Phone Number (616) 538-8499	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MID 000 003 335	Transporter's EPA I.D. Number MID 055 855 373	Facility Site EPA I.D. Number IND 016 360 265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES	LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
						No.	Type	Solid	Liquid	Gas	Sludge			
	1.	Waste Xylene	Flammable	1307	07	/	Dr	X				0.0055	gal	U239
	2.													
	3.													
	4.													
	5.													
	6.													

Include Safety precautions and special handling instructions.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1989 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature

Date Shipped
MO. DAY YEAR

①

82682

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No.

No. 1

640

Subsequent Transporter Vehicle I.D. No's

Transporter Signature

②

Subsequent transporter(s) signature(s)

③

Date(s) Received

082682

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature

④

Facility Site EPA I.D. Number

IND 016 360 265

☒ Accepted☐ Rejected

Date Received

82782

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed?

☐ Yes☒ No

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

T0210K T-50 - 82782 GRW TSDF COPY

002362

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

7122

TO:
T/S/D FACIL
E.P.A. ID Co
Address 4
Destination
Phone 21

1982

AL SERVICE

FROM:
Generator **FORT WAYNE POOL EQUIPMENT**
E.P.A. ID Code No. **TNT-100014035**
Address **510 Sumpter Drive**
Origin **Fort Wayne, Indiana**
Phone **219-493-1369**

No. Shipping Units

HAZARD CLASS

Haz Mat. I.D. No.

EPA Haz Waste No.

WEIGHT

LABELS REQUIRED (or Exemption No.)

11	WASTE ACETONE	FLAMMABLE	TNT-1000 1000	605		FLAMMABLE

PLACARDS REQUIRED **FLAMMABLE**

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse to the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

FREIGHT CHARGES

PREPAID COLLECT

☐ ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

EMERGENCY RESPONSE INFORMATION

T/S/D FACILITY
E.P.A. ID Code No.
Address
Destination

CONTACT Name
Phone
National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature

Fort Wayne Pool Equipment

Date

7/12/82

TRANSPORTER #1 **THOMAS SOLVENT COMPANY**

E.P.A. ID No. **MTD-039003932**

Address **5605 Planeview Drive**
City **Fort Wayne,**

State **IN** Zip **46825** Phone **219-492-0639**

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1
Signature

Date

7/14/82

TRANSPORTER #2

E.P.A. ID No.

Address
City
State
Zip
Phone

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2
Signature

Date

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY
Signature

61 May

Date

7/14/82

TO 200R T-50T/S/D F COPY
GRM 7.14.82

002363

HAZARDOUS WASTE

HAZARDOUS WASTE

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0467870

Authorization Number 921579
8 13

RICHARDSON GRAPHICS 9797 W. 151st St. 3123497272 0312310004
(Company Name) Address Phone Number Generator Number
ORLAND PARK IL 60462 ILD251913564
City State Zip EPA Number

WASTE HAULER(S)

MR. FRANK INC. 201 W. 155th St 3125963377 ILD069506160
Hauler Name Hauler Address Phone Number EPA Number
SO. HOLLAND IL

S.W.H. Registration Number 0079015
25 31

S.W.H. Registration Number _____
32 38

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

AMERICAN CHEMICAL SERVICE 420 So. COLFAX 91808902
(Facility Name) Address Site Number
GRIFFITH IN 46319 3127683400 IND086360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: WASTE XYLENES (RQ1000454) WASTE PHASE: LIQUID
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

XYLENE (X4L0L) (RQ1000454) FLAMMABLE LIQUID UN1307 U239
UN or NA Number EPA HW Number

WEIGHT FOR D.O.T. USE 2 LBS TONS (circle one) WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL. QUANTITY OF WASTE DELIVERED: 400 1 GALLONS (Circle One)
53

METHOD OF SHIPMENT (Circle One) (DRUMS 8) TANK TRUCK OPEN TRUCK OTHER (Specify) FLAT BED
Number

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

[Signature]
(Authorized Signature)

DATE: 6/18/82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Tom Berry
(Authorized Signature)
(2) _____
(Authorized Signature)

DATE: 06/18/82
54 59

DATE: _____

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES _____ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

[Signature]
(Authorized Signature)

DATE: 6/18/82
60 65

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 3

SITE COPY - PART 3

TO 210K T-50 GRM 6-18-82

002364

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

TO: AMERICAN CHEMICAL SERVICE T/S/D FACILITY		FROM: Generator SIGNA CORPORATION	
E.P.A. ID Code No. INDO-1630265		E.P.A. ID Code No. INDO69761195	
Address 420 S. Colfax		Address P.O. BOX 51 (Industrial Park)	
Destination Griffith, Indiana 46319		Origin Dacatur, Indiana 46733	
Phone 219-924-4370		Phone 219-724-9111	

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz.Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
2	ACETONE	FLAMMABLE	UN1090	UN002	110	FLAMMABLE

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignee, the consignee shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

FREIGHT CHARGES
PREPAID COLLECT

(Signature of Consignee)

☐☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

T/S/D FACILITY _____
E.P.A. ID Code No. _____
Address _____
Destination _____

EMERGENCY RESPONSE INFORMATION

CONTACT Name _____
Phone _____
National Response Center 1-800-424-8802
in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 _____ E.P.A. ID No. _____

Address _____

City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____

Address _____

City _____ State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D FACILITY Signature _____ Date _____

T/S/D F COPY To 121KT-63:

6PM 0051385

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

11-10

TO: T/S/D FACILITY AMERICAN CHEMICAL SERVICE		FROM: Generator SIGMA CORPORATION	
E.P.A. ID Code No. INDO-16360265		E.P.A. ID Code No. END069761195	
Address 420 S. Colfax		Address Industrial Park	
Destination Griffith Indiana		Origin Decatur, Indiana 46733	
Phone 219-924-4370		Phone 219-724-9111	

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz. Mat. I.D. No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
4 DRS.	WASTE ACETONE	FLAMMABLE	UN-1090	U002	220 GL	FLAMMABLE

PLACARDS REQUIRED **FLAMMABLE**

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse to the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

FREIGHT CHARGES
PREPAID ☐ COLLECT ☐

(Signature of Consignor)

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

EMERGENCY RESPONSE INFORMATION

T/S/D FACILITY _____	CONTACT Name _____
E.P.A. ID Code No. _____	Phone _____
Address _____	National Response Center 1-800-424-8802
Destination _____	in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 THOMAS SOLVENT COMPANY	E.P.A. ID No. MID-039993902
Address 5605 Planeview Drive	
City Fort Wayne	State IN Zip 46825 Phone 219-482-9638

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 1 Signature _____ Date _____

TRANSPORTER #2 _____	E.P.A. ID No. _____
Address _____	
City _____	State _____ Zip _____ Phone _____

This is to certify acceptance of the hazardous waste shipment.

Transporter No. 2 Signature _____ Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY To 1092 T-63 10/13/81 grom
T/S/D FACILITY Signature _____
Date _____

This is to certify acceptance of the hazardous waste for treatment, storage, or disposal.

T/S/D F COPY

002366

HAZARDOUS WASTE

HAZARDOUS WASTE

TO BE COMPLETED BY
WASTE GENERATOR

STATE OF ILLINOIS

ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF LAND POLLUTION CONTROL
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706
(217) 782-6760
SPECIAL WASTE HAULING MANIFEST

0678875

Authorization Number 8 13

ASHLAND CHEMICAL CO. P.O. BOX 1129 312891 8230 0310390005
(Company Name) Address Phone Number
CALUMET CITY IL 60409 ILD 043369446
City State Zip EPA Number

WASTE HAULER(S)

STRAND TRUCKING 13640 S. KENTON 0024001
Hauler Name Hauler Address S.W.H. Registration Number
CRESTWOOD, ILL. 3123858440 ICT000646810
Phone Number EPA Number

Hauler Name Hauler Address S.W.H. Registration Number
Phone Number EPA Number

AMERICAN CHEMICAL CO. 420 S. COLFAX 91808902
(Facility Name) Address Site Number
GRIFFIN IN 46319 3127683400 IND016360265
City State Zip Phone Number EPA Number

Alternate (Facility Name) Address Site Number
City State Zip Phone Number EPA Number

TO BE COMPLETED BY
WASTE GENERATOR

WASTE NAME: WASTE PHENOLIC RESIN

WASTE PHASE: Liquid

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE RESIN SOLUTION

HAZARDOUS SUBSTANCE Liquid
OR SOLID NOS ORME

NA9188
UN or NA Number

D003
EPA HW Number

WEIGHT FOR D.O.T. USE 2500 2500 TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 000250

1 GALLONS (Circle One)
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS 5)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

UAT

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Dave Bragg
(Authorized Signature)

DATE: 12-2-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Gim Bate
(Authorized Signature)

DATE: 12/3/82

(2) _____
(Authorized Signature)

DATE: 1/1/83

DISPOSAL, STORAGE, OR TREATMENT FACILITY*

HAZARDOUS WASTE SUBJECT TO FEE YES ☒ NO ☐

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Michael E. Bragg
(Authorized Signature)

DATE: 12/3/82

COMMENTS OR SPECIAL INSTRUCTIONS:

WASTE DISPOSAL MANIFEST

☐ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste☐ Other

MI 0226360

IDENTIFICATION	Generator's Name BLODGETT HOSPITAL	Primary Transporter's Name VALLEY CITY REFUSE DISP.	Treatment, Storage or Disposal Facility AMERICAN CHEMICAL SERVICE
	Site Address 1840 WEALTHY ST. GRAND RAPIDS MI 49506	Transporters Address 2640 THORNWOOD SW WYOMING MI 49509	Facility Address 430 S. COLFAX AVE. GRIFFITH, IND 46319
	Phone Number 616 774-7794	Phone Number 616 538-8499	Phone Number (319) 924-4370
	Generator's Site EPA I.D. Number MI D079292512	Transporter's EPA I.D. Number MI D053855373	Facility Site EPA I.D. Number IND 016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES	LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
						No.	Type	Solid	Liquid	Gas	Sludge			
	1.	WASTE XYLENE	FLAMMABLE LIQUID	UN1307	07	1	DR		✓			55 GAL		1239
	2.													
	3.													
	4.													
	5.													
	6.													

Include Safety precautions and special handling instructions.

KEEP FROM FLAME OR OPEN FIRE

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature

Date Shipped
MO DAY YEAR

11/29/82

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. **No. 1 640**

Subsequent Transporter Vehicle I.D. No's

Transporter Signature

Date(s) Received

11/29/82

Subsequent transporter(s) signature(s)

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature

Facility Site EPA I.D. Number

☒ Accepted
☐ Rejected

Date Received

11/30/82

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed?

☒ Yes
☐ No

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

On dock 11/29/82

TSDF COPY

To 20472 7-50 GRM 12882

WASTE DISPOSAL MANIFEST

☐ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste☐ Other

MI 0226359

IDENTIFICATION	Generator's Name BLODGETT HOSPITAL	Primary Transporter's Name VALLEY CITY REFUSE DISP.	Treatment, Storage or Disposal Facility AMERICAN CHEMICAL SERVICE
	Site Address 1840 WEALTHY S.W. GRAND RAPIDS MI. 49506	Transporters Address 2640 THORNTONWOOD SW. WYOMING MI 49509	Facility Address 420 S. COLIFAX AVE GRIFFITH, IND 46319
	Phone Number 616 774-7794	Phone Number 616 538-8499	Phone Number 319 924-4370
	Generator's Site EPA I.D. Number MI D079292512	Transporter's EPA I.D. Number MI F0055855373	Facility Site EPA I.D. Number IND0016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES	LOT NO.	U.S. D.O.T. Shipping Name (or common name if there is no D.O.T. shipping name).	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Total Weight or Volume	Units	Hazardous or Liquid Waste Number
						No.	Type	Solid	Liquid	Gas	Sludge			
	1.	WASTE XYLENE	FLAMMABLE LIQUID	UN1307	6.1	2	DR	X				110 GAL		U239
	2.													
	3.													
	4.													
	5.													
	6.													

Include Safety precautions and special handling instructions.

KEEP FROM FLAME OR OPEN FIRE

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or 1969 PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature

Date Shipped
MO. DAY YEAR

Richard J. Kennedy

10/13/82

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No.

No. 1

640

Subsequent Transporter Vehicle I.D. No's

Transporter Signature

Date(s) Received

Russell Hemminger

10/13/82

Subsequent transporter(s) signature(s)

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature

☒ Accepted
☐ Rejected

Date Received

Facility Site EPA I.D. Number

10/15/82

IND0016360265

Describe any significant discrepancies between manifest and shipment.

Was a Surcharge Assessed?

☐ Yes
☐ No

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 800-292-4706 OR OUT-OF-STATE AT 517-373-7660 AND THE NATIONAL RESPONSE CENTER AT 800-424-8802 24 HOURS PER DAY.

TO 124 ET-63 6104 TSDF COPY 10/14/82

002369

WASTE DISPOSAL MANIFEST

☐ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste (OTHER)

MI 0048777

IDENTIFICATION	Generator's Name BLODGETT HOSPITAL	Primary Transporter's Name VALLEY CITY REFUSE DISH	Treatment, Storage or Disposal Facility AMERICAN CHEMICAL SERV.
	Site Address 1840 W. RALPH S.E. GRAND RAPIDS MI 49418	Transporters Address 2640 THORNWOOD S.W. WYOMING MI 49509	Facility Address 430 S. COLFAX N.W. GRIFFITH IND. 46319
	Phone Number 616.774-7794	Phone Number 616.538 8499	Phone Number 319.924 4370
	Generator's Site EPA I.D. Number MI0079292512	Transporter's EPA I.D. Number MI0055855373	Facility Site EPA I.D. Number IN0016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Weight or Volume	Units	Hazardous Waste Number
					No.	Type	Solid	Liquid	Gas	Sludge			
1.	WASTE XYLENE	FLAMMABLE LIQUID	UN1307	07	1	DR		X				55 GAL	U239
2.													
3.													
4.													
5.													
6.													

Include Safety precautions and special handling instructions.

WIEP FROM FLAME AND OPEN FIRES

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature

Date Shipped
MO. DAY YEAR

08/26/82

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No. **No. 1 640**
Subsequent Transporter Vehicle I.D. No's

Transporter Signature

Date(s) Received

08/26/82

Subsequent transporter(s) signature(s)

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature

☒ Accepted
☐ Rejected

Date Received

8/27/82

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800-294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800-424-8802

T0210E1-506PM 8-27-82

TSDF COPY

002570

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste (OTHER)

MI 0048778

IDENTIFICATION	Generator's Name BLODGETT HOSPITAL	Primary Transporter's Name VALLEY CITY REUSE DISP	Treatment, Storage or Disposal Facility AMERICAN CHEMICAL SERVICE
	Site Address 1840 WEALTHY ST GRAND RAPIDS MI 49506	Transporter's Address 2640 THORNWOOD SW WYOMING MI 49509	Facility Address 420 S. COLFAX N.W. GRIFFITH, IND. 46319
	Phone Number 616 774 7794	Phone Number 616 538 8499	Phone Number 319 924-4370
	Generator's Site EPA I.D. Number MI0079292512	Transporter's EPA I.D. Number MF005585373	Facility Site EPA I.D. Number IND016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES	WASTE INFORMATION	LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Weight or Volume	Units	Hazardous Waste Number
							No.	Type	Solid	Liquid	Gas	Sludge			
	1.		WASTE XYLENE	FLAMMABLE LIQUID	UN130707		1	DR		X			55 GAL		U239
	2.														
	3.														
	4.														
	5.														
	6.														

Include Safety precautions and special handling instructions.

KEEP FROM FLAME OR OPEN FIRE

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature

Date Shipped
MO DAY YEAR*Richard J. Kennedy*

07.08.82

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter Vehicle I.D. No.

No. 1

1283

Subsequent Transporter Vehicle I.D. No's

Transporter Signature

Bates R

Date(s) Received

07.08.82

Subsequent transporter(s) signature(s)

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature

Michael J. Bates☒ Accepted
☐ Rejected

Date Received

7.9.82

Describe any significant discrepancies between manifest and shipment.

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste (OTHER)

MI 0048776

IDENTIFICATION	Generator's Name BLODGETT HOSPITAL	Primary Transporter's Name VALLEY CITY REFUSE DISP.	Treatment, Storage or Disposal Facility AMERICAN CHEMICAL SERVICE
	Site Address 1840 WEALTHY S.W. GRAND RAPIDS, MI 49506	Transporter's Address 2640 THORNWOOD SW WYOMING, MI 49509	Facility Address 420 S. COLFAX AVE. GRIFFITH, IND 46319
	Phone Number (616) 774-7794	Phone Number (616) 538-8499	Phone Number (319) 924-4370
	Generator's Site EPA I.D. Number MI D079292512	Transporter's EPA I.D. Number MI D055855373	Facility Site EPA I.D. Number IND 016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES

WASTE INFORMATION	LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Weight or Volume	Units	Hazardous Waste Number
	No.	Type	Solid	Liquid	Gas	Sludge								
	1.	WASTE XYLENE	FLAMMABLE LIQUID	UN1307	0M	1	DR	X				55 GAL	U239	
	2.													
	3.													
	4.													
	5.													
	6.													

COMMENTS	Include Safety precautions and special handling instructions.
	KEEP FROM FLAME OR OPEN FIRES

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.	Generator Signature <i>Richard J. Kennedy</i>	Date Shipped MO. DAY YEAR 06 03 82
---	--	--

TRANSPORTER COMPLETES

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.	Transporter Vehicle I.D. No. 218-4	Transporter Signature <i>Byrd</i>	Date(s) Received 06 03 82
---	--	--------------------------------------	------------------------------

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF COMPLETES

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.	TSDF Signature <i>J. Bunker</i>	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Rejected	Date Received 6 4 82
	Facility Site EPA I.D. Number IND 016360265		

Describe any significant discrepancies between manifest and shipment.

WASTE DISPOSAL MANIFEST

☐ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste (OTHER)

MI 0002826

IDENTIFICATION	Generator's Name BLODGETT HOSPITAL	Primary Transporter's Name VALLEY CITY REFUSE DISP	Treatment, Storage or Disposal Facility AMERICAN CHEMICAL SERVICE
	Site Address 1840 WEALTHY S.W. GRAND RAPIDS MI 49506	Transporters Address 2640 THORNWOOD S.W. WYOMING MI 49509	Facility Address 420 S. COLFAX AVE GRIFFITH, IND 46319
	Phone Number (616) 774-7794	Phone Number (616) 538-8499	Phone Number (219) 924-4370
	Generator's Site EPA I.D. Number MI D0979292512	Transporter's EPA I.D. Number MI D055855373	Facility Site EPA I.D. Number IN D016360265

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

GENERATOR COMPLETES	LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Weight or Volume	Units	Hazardous Waste Number
						No.	Type	Solid	Liquid	Gas	Sludge			
	1.	WASTE XYLENE	FLAMMABLE LIQUID	1307	07	2	DR		X			1110	GAL	U2319
	2.													
	3.													
	4.													
	5.													
	6.													

Include Safety precautions and special handling instructions.

KEEP FROM FLAME OR OPEN FIRES.

GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.

Generator Signature

① Frederick G. W.

Date Shipped
MO. DAY YEAR

5/17/82

HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.

Transporter
Vehicle I.D. No.

No. 1 H213-1

Subsequent
Transporter
Vehicle I.D. No's

Transporter Signature

② [Signature]

Subsequent transporter(s) signature(s)

③ [Signature]

Date(s) Received

5/17/82

If the shipment cannot be delivered, describe the reasons for non-delivery.

TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.

TSDF Signature

④ [Signature]

Facility Site EPA I.D. Number

IND016360265

☒ Accepted
☐ Rejected

Date Received

05/18/82

Describe any significant discrepancies between manifest and shipment.

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800-294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800-424-8802

TSDF COPY

 Bt- On dock 5-18-82 GKM
 TO 310 R.T. - 50 GPM 5-26-82

WASTE DISPOSAL MANIFEST

☒ Act 64 Waste (HAZARDOUS)☐ Act 136 Waste (OTHER)

MI 0048791

IDENTIFICATION	Generator's Name <i>Blodgett Hospital</i>	Primary Transporter's Name <i>Valley City Refuse Disp</i>	Treatment, Storage or Disposal Facility <i>American Chemical Service</i>
	Site Address <i>1840 Wealthy SE. Grand Rapids MI. 49506</i>	Transporters Address <i>2640 Thonnwood SW Wyoming MI. 49509</i>	Facility Address <i>420 S Colfax Ave. Griffith, Ind. 46319</i>
	Phone Number <i>(616) 774-7794</i>	Phone Number <i>(616) 538-8499</i>	Phone Number <i>(219) 924-4370</i>
	Generator's Site EPA I.D. Number <i>MI D0792925112</i>	Transporter's EPA I.D. Number <i>MF D055855373</i>	Facility Site EPA I.D. Number <i>IND016360265</i>

If more than one Transporter is to be utilized, give the Name and EPA I.D. Number of each:

LOT NO.	U.S. D.O.T. Shipping Name	D.O.T. Hazard Class	U.N./N.A. No.	Haz. Class Code	Container		Form				Weight or Volume	Units	Hazardous Waste Number
					No.	Type	Solid	Liquid	Gas	Sludge			
1.	<i>Waste Xylene</i>	<i>Flammable Liquid</i>	<i>UN1307</i>	<i>073</i>	<i>DR</i>	<i>X</i>					<i>165 Gal.</i>	<i>4239</i>	
2.													
3.													
4.													
5.													
6.													

COMMENTS	Include Safety precautions and special handling instructions.
	<i>Keep from flame or open fires.</i>

TRANSPORTER COMPLETES	GENERATOR CERTIFICATION: I certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and U.S. EPA. I further certify that the information contained on the manifest is factual. I understand that the failure to accurately report all information requested by the manifest constitutes a violation of 1979 PA64 and/or PA136. I further understand that this manifest may be used in administrative and court proceedings.		Generator Signature <i>① Frederick A. Gil</i>	Date Shipped MO. DAY YEAR <i>3 08 82</i>
	HAULER'S CERTIFICATION: I certify acceptance of the above identified wastes for transportation. I further certify that I shall deliver the hazardous wastes, together with this manifest, only to the destination specified by the generator on this manifest. I understand that this manifest can be used in administrative and court proceedings.	Transporter Vehicle I.D. No. <i>No. 1 4273-1</i>	Transporter Signature <i>② Arnold Dykstra</i>	Date(s) Received <i>03 08 82</i>
		Subsequent Transporter Vehicle I.D. No's	Subsequent transporter(s) signature(s) <i>③</i>	

TRANSPORTER COMPLETES	If the shipment cannot be delivered, describe the reasons for non-delivery.
-----------------------	---

TSDF COMPLETES	TSDF CERTIFICATION: I certify receipt at this facility of the above identified wastes and that this facility is licensed to accept those wastes. I also certify that the wastes were accompanied by a manifest properly certified by both the generator and hauler and that this facility is the destination indicated on the manifest. I understand that this manifest can be used in administrative and court proceedings.	TSDF Signature <i>④ [Signature]</i>	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Rejected	Date Received <i>3 8 82</i>
		Facility Site EPA I.D. Number <i>IND016360265</i>		

TSDF COMPLETES	Describe any significant discrepancies between manifest and shipment.
----------------	---

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY ALERTING SYSTEM AT 800-294-4706, 24 HOURS PER DAY AND THE NATIONAL RESPONSE CENTER AT 800-424-8802

③ T0204RT-50 6PM TSDF COPY 3/9/82

HAZARDOUS WASTE MANIFEST

THIS MEMORANDUM

Is an acknowledgement that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

MANIFEST DOCUMENT NUMBER

#1

TO: T/S/D FACILITY AMERICAN CHEMICAL SERVICE		FROM: Generator U.S. METALCRAFT	
E.P.A. ID Code No. INDO-1630265		E.P.A. ID Code No. EXEMPT	
Address 420 S. Colfax		Address 101 South Franklin Street	
Destination Griffith, Indiana 46319		Origin Delphos, Ohio 45833	
Phone 219-924-4370		Phone 419-692-4962	

No. Shipping Units	D.O.T. PROPER SHIPPING NAME	HAZARD CLASS	Haz Mat. I.D. No.	EPA Haz Waste No.	WEIGHT	LABELS REQUIRED (or Exemption No.)
6	WASTE ACETONE	FLAMMABLE LIQUID	1090	II-002	1980	FLAMMABLE

PLACARDS REQUIRED

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ Per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor) _____

FREIGHT CHARGES
PREPAID ☐ COLLECT ☐

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ALTERNATE DESTINATION (EMERGENCY ONLY)

EMERGENCY RESPONSE INFORMATION

T/S/D FACILITY _____	CONTACT Name _____
E.P.A. ID Code No. _____	Phone _____
Address _____	National Response Center 1-800-424-8802
Destination _____	in D. C. 426-2675

CERTIFICATION

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the E.P.A.

Generator Signature _____ Date _____

TRANSPORTER #1 **THOMAS SOLVENT COMPANY** E.P.A. ID No. **MTD-039993902**
Address **5605 Planeview Drive**
City **Fort Wayne** State **IN** Zip **46825** Phone **219-483-7322**

Transporter No. 1 Signature _____ This is to certify acceptance of the hazardous waste shipment. Date _____

TRANSPORTER #2 _____ E.P.A. ID No. _____
Address _____
City _____ State _____ Zip _____ Phone _____

Transporter No. 2 Signature _____ This is to certify acceptance of the hazardous waste shipment. Date _____

TREATMENT/STORAGE/DISPOSAL FACILITY

T/S/D FACILITY Signature _____ This is to certify acceptance of the hazardous waste for treatment, storage, or disposal. Date _____

T/S/D F COPY To 12/KT-63
002375 E/11/11 10-21-82